Office Use Only		\$	
	Date Filed	Fee	Application Number



## JOHNSON COUNTY, IOWA

**APPLICATION FOR: ZONING AMENDMENT** 

Application is hereby made to:				
☐ Reclassify certain proper	ty on the Johnson County Zoning Map.			
☐ Amend the text of the Johnson County Unified Development Ordinance (UDO)				
For Map Changes Only: The property to be rezoned is loc	cated at (street address if available or layman's description):			
Parcel Number(s) (legal descript	ion must also be attached):			
The area to be rezoned is compri	ised oftotal acres.			
Current Zoning Classification(s):	Proposed Zoning Classification(s):			
The undersigned affirms that the in affirms that the owner(s) of the pro	PLEASE PRINT OR TYPE  formation provided herein is true and correct. If applicant is not the owner, applican operty described on this application consent to this application being submitted, and sent for the office of Johnson County Planning, Development, and Sustainability to			
Name of Owner	Name of Applicant (if different)			
	ng City, State, Zip)			
 Applicant Phone	Applicant Email			

**See back page for Application Submittal Requirements and Checklist** 

The following items must be submitted for the application to be complete. Incomplete applications will be returned and will not be considered until the next submission deadline. If working with an engineer who can provide CAD or GIS line work, electronic submissions should be submitted in accordance with the PDS department's electronic submission guidelines (see below). Preference is that electronic submission is provided prior to hard copy submission, or the day after the posted submission deadline.

<u>Initial each item below</u> to confirm that you are aware of the submittal requirements for an application to be considered complete.

 A brief cover letter explaining the application and outlining the intended end use. If the request
includes multiple proposed zoning classifications, the letter should include a breakdown of the number of acres being changed to each zoning designation requested.
 Resolution Affirming the Stability of the Road System (signed and notarized).
 Ten (10) copies of the rezoning exhibit (and any other sheets larger than 11x17).
 The names and addresses of owners of all property within five hundred (500) feet of the parcel being rezoned.
 A map of sufficient size to show the property for rezoning out-lined in red and the property within 500 feet of the property for rezoning outlined in blue.
 Application Fee (varies based on nature of application) is due at the time of submittal.
Fee submitted:
 Proof of application to Johnson County Public Health for a Public Health Zoning Application.

<u>(Optional) Electronic Submission Requirements</u> – If an electronic submission of a rezoning exhibit is being submitted, it should conform with the following:

Electronic or digitized copy (CAD line work or GIS geodatabse) of proposed plat in .dwg format (.dxf is also acceptable if .dwg is not an option. No .zip files will be accepted).

- Submission must be saved in AutoCAD 2007 or older format
- Submissions must use Coordinate System: NAD 1983 StatePlane Iowa South FIPS 1402 Feet
- If applicable, submission <u>should</u> include information for Sensitive Areas Analysis/Mapping and Stormwater/Soil Erosion Control infrastructure on the site. This includes any limits of disturbance or other impact areas.
- Submission should NOT include legends, legal descriptions, location maps, signature blocks, etc.