Office Use Only Date Filed Fee	Application Number
Johnson County, Iowa Application for: Zoning Ame	
Application is hereby made to:	
Reclassify certain property on the Johnson	on County Zoning Map.
Amend the text of the Johnson County U	Inified Development Ordinance (UDO)
For Map Amendments – Complete This Section: The property to be rezoned is located at (street at 1420 Highway 965 NW Swisher, Iowa 52338	ddress if available or layman's description):
Parcel Number(s) (legal description must also be a	attached): MILLARDS SIXTH SUBDIVISION LOT 2 EXC THAT LANDDESC AS AUDITOR'S PARCEL #2006098 INSURVEY BK 49 PG 312
MILLARD'S SIXTH SUBDIVISION LOT 2 EXC THAT LANDDESC	
The area to be rezoned is comprised of 1.71 Current Zoning Classification(s): R	total acres Proposed Zoning Classification(s): RUA
For Text Amendments – Complete This Section: The amendment(s) propose changes to the followi and provide the specific code reference):	ing sections of the UDO (please be as specifics as possible,
applicant affirms that the owner(s) of the proper	vided herein is true and correct. If applicant is not the owner, ty described on this application consent to this application their consent for the office of Johnson County Planning, visit and photograph the subject property.
Name of Owner	Name of Applicant (if different)
1420 Highway 965 NW Swisher, Iowa 52338	
Applicant Street Address (including City, State, Zip)	
Applicant Phone Applicant Applicant Signature	Email

See back page for Application Submittal Requirements and Checklist

<u>Applications should be emailed to planning@johnsoncountyiowa.gov and delivered to the Planning,</u>

<u>Development and Sustainability Office (913 South Dubuque Street, Iowa City, IA 52240)</u>

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, but will be accepted until 12:00 p.m. the day after the submittal deadline.

<u>Initial each empty box below</u> to ensure you included all necessary information in the appropriate form for an application to be considered complete. Some items may require both electronic and physical copies.

Items Required – <u>for Map Amendments</u>	Electronic Copy (PDF unless otherwise noted)	Hard Copy
Application Fee (varies based on application. Fee: \$)		
This application form with all information completed		(2)
Brief cover letter explaining the application and the intended end use.		
Word document with the legal description of each area being rezoned by zoning designation requested		
Optional: A rezoning exhibit (submit one hard copy, a PDF, and CAD line work following the guidelines below)		
Signed and notarized Resolution Affirming the Stability of the Road System		
Proof of application to Johnson County Public Health for a Public Health Zoning Application		
For requests to rezone to RE-Renewable Energy:		
 Completed "Application Checklist for Utility-Scale Solar Systems (Supplemental Conditions)", accompanied by all information outlined on said checklist. 		
 Electronic Submission of all materials is required. 		

Items Required – <u>for Text Amendments</u>	Electronic Copy (PDF unless otherwise noted)	Hard Copy
Application Fee (\$750)		
This application form with all information completed		(2)
Brief cover letter explaining the requested code change and outlining the reasoning of why the change is being requested		
The proposed code changes indicating the specific sections and wording to added, deleted, and/or changed. This must be in a format which staff can clearly and accurately interpret and translate into official ordinance amendment format (Contact the office with questions or for more detail)		
Optional: Any other supporting information the applicant wishes to submit.		

Electronic Submission Requirements for CAD line work:

- Must be in AutoCAD 2017 or older and .dwg format (.dxf is also acceptable, no .zip files will be accepted).
- Submissions must use Coordinate System: NAD 1983 StatePlane lowa_South_FIPS_1402_Feet
- If applicable, submission should 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.

Beacon Johnson County, IA



Parcel ID 0316231002 Sec/Twp/Rng **Property Address**

Alternate ID 03-16-2N Class R Acreage 3.75

Owner Address HUSTON, DAVID A 2635 140TH ST NW SWISHER IA 52338-9565 Value \$79500

Parcels

Centerlines

JFG District

MILLARD FOURTH SUBDIVISION LOT 2 **Brief Tax Description** (Note: Not to be used on legal documents)

Date created: 5/10/2022 Last Data Uploaded: 5/10/2022 1:10:12 PM

Developed by Schneider

Beacon Johnson County, IA



Centerlines

Date created: 5/10/2022 Last Data Uploaded: 5/10/2022 1:10:12 PM





•	For Office Use Only:
	ZONING NUMBER:
Johnson County Public Health	
855 S. Dubuque Street Suite 217 * Iowa City, Iowa 52240 * 319/356-604	0 * Fax: 319/356-6044

Johnson County Public Health Zoning Application

1319		Ą			
Applicant Name:	Phone Number:	.AF			
Loran Vis					
Address:	City:	State:	Zip:		
1420 Highway965 NW	Swisher	Ia	52338		
NOTE: THIS APPLICATION NEED NOT BE SUBMITTED FOR FINAL PLATS.					
Type of Zoning Request:	APPLICATION	FEE:			
Zoning reclassification fromR toRUA	\$75.00 Application Fee				
Combined preliminary and final plat	\$50.00 + \$20.00 per	Lot Applica	ation Fee*		
Preliminary plat using private onsite/centralized waste water sys	\$50.00 + \$20.00 per	Lot Applica	ation Fee*		
☐ Conditional Use Permit	\$25.00 Application Fee				
	*Out	lots Exer	npt		
Application Fee $\frac{\$75.00}{+}$ + Lot Fee (if applicable) (Number of lots Minus Number of Outlots = x $\$20.00$ Fee Per Lot) = Enclosed FeeCalling Office with card number					
PLEASE RETURN THIS APPLICATION AND APPROPRIATE APPLICATION FEE TO:					
JOHNSON COUNTY PUBLIC HEALTH 855 S. DUBUQUE STREET SUITE 217 IOWA CITY, IA 52240					
The application and fee must be received by the department NO LESS THAN 24 HOURS prior to the Johnson County Zoning commission public hearing and/or the Johnson County Zoning Board of Adjustment.					
No refund shall be made of any required fee accompanying a required application once filed with the administrative officer.					
Loran Vision to the Control of Applicant:	Date:	['] 2025			