Zone Change Application City of Harrison

SUBMITTALS

A zone change request is made by submitting the following information to the City Clerk:

- 1. The completed attached form;
- 2. An owners list prepared by a title insurance company, listing the addresses of all property owners within 300 feet from the external boundaries of the property described in the application, and the property
- owners within the property described in the application. The list shall be prepared using the last known name and address of such owners as shown on the latest adopted tax roll of the county.
- 3. A residents' list prepared by the applicant, listing the addresses of all residential property that is not owner-occupied, lying within 300 feet from the external boundaries of the property described in the application, and which are within the property described in the application, and
- 4. A \$325.00 processing fee (payable to the City of Harrison).

Additional Requirements:

1. The applicant is required to post a public hearing notice, provided by the City Clerk, on the property at a location visible from the nearest public road. This posting must be done 1 (one) week prior to the date of the next regular Planning Commission meeting at which this item will be heard. An affidavit testifying where and when the notice was posted and by whom is also required.

Received: City Clerk: Date:
Received: Planning: Date:
Accepted: Planning: Date:

Please type or print the following required information:	
APPLICANT:	
Name of Applicant:	-
Mailing Address:	-
Telephone Number:	-
Filing Capacity:	
1. Recorded property owner as of	_(date)
2. Purchasing (under contract) as of,	(date)
3. The Lessee or Renter as of	_(date)
4. The authorized agent of any of the foregoing, duly authorized in attached to the application)	writing. (Written authorization must be
Engineer and/or Surveyor:	-
Name:	-
Mailing Address:	-
Telephone Number:	-
1. Legal Description of property:	
2. Size of area involved: acres, and/or	_sq.ft.
3. Total number of lots included:	

4. Existing land use:			
5. Existing addresses (if fewer th	nan 10):		
6. ExistingZoning:			
CERTIFICATION FOR ADDR	ESS LISTS OWNERS	HIP LIST	
Attached is a listing of the address	ses of all property owner	rs within 300 feet of this	request as
Described under "Submittals".			
The list was compiled by			
RESIDENTS LIST	(title company)		
Attached is a listing of the address of this request as described under		•	
(date)		(1	name)
REQUEST From	to		
(existing zone)'		" (proposed zone)	

JUSTIFICATION

Please use this space to state the reason(s) for the requested zoning and annexation. Appropriate Comprehensive Plan goals and policies should be included in your reasons.

APPLICATION CER TIFICATION

CERTIFICATION of APPLICAN	T: *	
	being duly sworn, attests that	at
he/she is the applicant of this reque	est and knows the contents thereof to be true to his	/her knowledge.
	Signed:	
	(applicant)	
Notary to complete this section:		
	Subscribed and sworn to before me this	day of.
	2007.	
	Notary Public for	
	Residing at:	
	My commission expires:	
CERTIFICATION OF OWNER:	(if different from Applicant)	
I have read and consent to the filing this application.	g of this application as the owner of record of the are	ea being considered in
Name:		
Address:		
Telephone No.:		
Signed by Owner		
*For multiple applicants, please su	abmit multiple copies of this page.	