

APPLICATION FOR ZONING MAP AMENDMENT

Date of Application:	
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CITY OF FAIRFIELD / PLANNING & ZONING

407 Soldier Road / P.O. Box 336 / Fairfield, Idaho 83327

OWNER(s):			Phone #:	
			Phone #:	
	Mailing Address:			
	Email:			
DEVELOPER:			Phone #:	
(if other than owner)	Mailing Address:			
	Email:			
PROPERTY INFORM				
Physical Address	s:			
Legal Description	n: LOT(s) #:	BLOCK #:	SUBDIVISION: _	
Current Zoning D)istrict:	Propose	ed Zoning District:	
		Curren	Land Use Designation	on:
			nt Land Use Designation to ammend the Compre	
FEES:	Rezone fee: (Rezor	ne fee is due with appl	ication)	\$ 350.00
	Land Use Change	fee: (if necessary)		\$ 350.00
	Publication: public	c hearing notices &	1 ordinance (appro	ximately \$200.00)
	Mailing: Number	of addresses	x 2 x \$1.00 =	\$
	Legal and/or Engi	neering Costs:		\$
	d. If the City incurrs le	egal, engineering, or oth	er cost directly related to	applicant after the application o a rezone or the appeal of a
REQUEST:				
The Applicant(s) here	by request that the	real property locate	d at (street address): _	
and legally described	as:			
be REZONE on the of	fficial Zoning Map	with a Zoning Desig	gnation of	
functions, enter upon the this application, pursuant	oroperty owner acknow property to inspect, po to Idaho Code \$67-650 and City Council are re	ost legal notices, and/or of 07. The property owner equired to generally disc	other standard activities in is also hereby notified the lose the content of any ex	at members of the Planning parte discussion (outside the
		Signature:		

THE FOLLOWING INFORMATION IS REQUIRED TO ACCEPT AN APPLICATION:

- 1. One (1) physical set of the proposed plan and a digital copy of the proposed site showing:
 - a. Location of all buildings;
 - b. Parking and loading areas;
 - c. Traffic access and traffic circulations
 - d. Open spaces;
 - e. Utilities;
 - f. Property lines;
 - g. Flood Plain areas and/or Stream Beds

The plan must be drawn to scale at no great than one inch equals twenty feet (1" to 20"). (Additional copies these plans may be required following administrator's approval of plans, or if significant changes are made to initial plan.)

- 2. A complete list of the owners of record for all property within three hundred (300) feet of the exterior boundary lines of the property. Contact Camas County Assessor's office (208) 764-2370, for the list of owners of record. This list must be accompanied by a sheet(s) of pre-printed mailing labels for the property owners with their addresses, or a digital file of the required addresses.
- 3. A narrative statement evaluating the effects on adjoining property; the effect of such elements as noise, glare, odor, fumes, and vibration on adjoining property; a discussion of the general compatibility with adjacent and other properties in the district; availability of public facilities or services; and the relationship of the proposed use to the Comprehensive Plan.
- 4. Such other information as may be reasonably required by the Administrator, Commission or Council prior to or during the review process.

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A partial application refund is available up to the time the application is deemed certified by the City Planning Administrator. Administrative costs will be deducted from the refunded application fee.

OFFICIAL USE ONLY:		
Zoning Map Amendment:		
Commission Hearing:	Notice Published:	
	Hearing Date:	
Council Hearing:	Notice Published:	
Rezone Ordinance:	Published:	