



REZONING APPLICATION

THE UNDERSIGNED do/does hereby respectfully make application and request to the City of Archdale to amend the **Zoning Ordinance** and change the Official Zoning Map of the City as hereafter requested, and in support of this application the following facts are shown:

1. It is desired and requested that the property hereinafter described be rezoned from to

2. The property sought to be rezoned is owned by:

Address:

Phone #:

3. Legal Description:

Address and PIN Number:

Lot(s)

Name of Subdivision: Plat Book: Page:

4. If the property is rezoned, it is understood by all that development must conform to the minimum requirements of the City of Archdale Development Ordinance where applicable.

5. The applicant shall present a map showing the property being requested for rezoning. He/she shall also present the names and addresses of those persons owning property which adjoins the land sought for rezoning.

Name of Applicant (if different from owner)

Signature of Owner

Applicant's Address

Owner's Address

Applicant's Telephone

Owner's Telephone

Complete application received ____/____/____

By: _____

This application must be filed with the **Director of Planning and Zoning** thirty (30) days prior to the scheduled Planning Board meeting and must be accompanied by a **(\$500.00)** filing fee.