



## PLANNING AND ZONING COMMISSION (P&Z) ZONING MAP AMENDMENT APPLICATION

ALL ITEMS ON THIS APPLICATION MUST BE COMPLETED.

**Application Fee: \$750.00\***  
**Per Fee Schedule**

**Applicant:** \_\_\_\_\_

Address/City/State/Zip: \_\_\_\_\_

Email Address: \_\_\_\_\_

Phone No: \_\_\_\_\_ Cell Phone No: \_\_\_\_\_ Fax No: \_\_\_\_\_

**Property Owner:** \_\_\_\_\_

Address/City/State/Zip: \_\_\_\_\_

Email Address: \_\_\_\_\_

Phone No: \_\_\_\_\_ Cell Phone No: \_\_\_\_\_ Fax No: \_\_\_\_\_

**Architect/Designer for Applicant:** \_\_\_\_\_

Address/City/State/Zip: \_\_\_\_\_

Email Address: \_\_\_\_\_

Phone No: \_\_\_\_\_ Cell Phone No: \_\_\_\_\_ Fax No: \_\_\_\_\_

**Property Address:** \_\_\_\_\_

Lot Number/Subdivision: \_\_\_\_\_ Existing Use: \_\_\_\_\_ Proposed Use: \_\_\_\_\_

Zoning Map Change Request (attach necessary documents): From \_\_\_\_\_ District to \_\_\_\_\_ District in order to develop:

### Checklist:

- ☐ Zoning Map Amendment requirements set forth in Section [1131.04](#)
- ☐ Attach a list of contiguous property owners as well as directly across the street from and within 250 feet of property
- ☐ Attach **one copy** of a vicinity map
- ☐ **1 digital copy** (CD, USB, Email) of the complete application packet.
- ☐ Attach statement of compatibility of proposed zoning and use with adjacent properties and comprehensive plan
- ☐ Attach the required fee - \$750.00\*

\*Does not include transcript cost, which actual cost incurred.

- ☐ Post a public notice sign at least (10) days prior to a public hearing or public meeting, pursuant to ordinance 1107.035

Public notice sign details found [here](#).

**(See Over)**

I agree to grant the City Staff, the Commission, Board or Council considering this application access to the property that is the subject of this application for the purposes of reviewing this application and posting public notice for this application.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Office Use

Received

Office Use

Type/Date: \_\_\_\_\_

Base Fee: \_\_\_\_\_ \$750.00

Prepared by: \_\_\_\_\_

Reviewed by: \_\_\_\_\_

PAYOR: \_\_\_\_\_

RECIEPT # \_\_\_\_\_

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