



City of Gainesville

ZONING DISTRICT CHANGE REQUEST APPLICATION

Description of Property

Name of Subdivision: \_\_\_\_\_ Lot & Block Number: \_\_\_\_\_
Number of Acres: \_\_\_\_\_ Survey: \_\_\_\_\_
Abstract: \_\_\_\_\_ Existing Zoning: \_\_\_\_\_
Physical Address (If Assigned): \_\_\_\_\_
Location of Property (Use directional N.S.E.W when possible): \_\_\_\_\_
Located in Floodplain\* [ ] Floodway [ ] 1% / 100year [ ] 5% / 500 year [ ] No

\* IF PROPERTY IS LOCATED IN A DESIGNATED FLOODPLAIN, A FLOODPLAIN APPLICATION AN ALL SUPPORTING DOCUMENTATION MUST BE SUBMITTED AND APPROVED PRIOR TO PROCESSING REZONING REQUEST

Owner (Applicant) Information

Owner

Applicant (If different from Owner)

Name: \_\_\_\_\_ Name: \_\_\_\_\_
Company: \_\_\_\_\_ Company: \_\_\_\_\_
Address: \_\_\_\_\_ Address: \_\_\_\_\_
City: \_\_\_\_\_ City: \_\_\_\_\_
State: \_\_\_\_\_ Zip: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_
Phone: \_\_\_\_\_ Phone: \_\_\_\_\_
Fax: \_\_\_\_\_ Fax: \_\_\_\_\_
E-Mail: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Please Provide The Following Information

Present zoning designation: \_\_\_\_\_ Desired zoning: \_\_\_\_\_
Reason(s) and justification for request: \_\_\_\_\_
Anticipated impact on traffic flow in area: \_\_\_\_\_

Anticipated impact on utilities in area: \_\_\_\_\_

Anticipated impact on storm water drainage if impervious area is increased: \_\_\_\_\_

Anticipated impact of zoning change on local economy: \_\_\_\_\_

Anticipated impact on employment: \_\_\_\_\_

Is this zoning request in conformance with the City of Gainesville's Comprehensive Land Use Plan?  Yes  No

Have any zoning request been made on this property in the last twelve months?  Yes  No

**Attachments**

Current property survey  (Attach to Form)

Listing of all property owners within 200' of all real boundaries.  (Attach to Form)

**OWNERS ACKNOWLEDGEMENT**

I hereby certify that I am the owner of the above-described property for the purpose of this application and further certify that the information provided herein is true and correct.

Owner's Signature: \_\_\_\_\_

Owners printed name and title: \_\_\_\_\_

In lieu of representing this request myself as the owner of the subject property, I hereby authorize the person designated above as applicant to represent this request on my behalf. The applicant will be the principal contact person with the City of Gainesville in processing and responding to requirements, information or issues relevant to this request.

Owner's Signature: \_\_\_\_\_

Applicant's Signature: \_\_\_\_\_

**FOR OFFICE USE ONLY**

Date Filed: \_\_\_\_\_ Fee Paid: Y \ N Receipt #: \_\_\_\_\_ Case Number: \_\_\_\_\_ P&Z Date: \_\_\_\_\_