



# APPLICATION FOR REZONING



date submitted \_\_\_\_\_ fee receipt number \_\_\_\_\_ case number \_\_\_\_\_

### APPLICANT INFORMATION

property owner(s) name(s) \_\_\_\_\_

contact phone (single point of contact) \_\_\_\_\_

mailing address \_\_\_\_\_

email (single point of contact) \_\_\_\_\_

### PROCESSING REQUIREMENTS

Provide the required information as indicated below. Pursuant to the Summerfield Unified Development Ordinance (UDO) currently in effect, this "Application for General Purpose Rezoning" will not be processed until the application fees have been paid, this form has been completed and signed, and all required maps, plans, and documents have been submitted to the UDO Zoning Administrator's satisfaction.

### PROPERTY INFORMATION

Pursuant to the UDO, the undersigned hereby requests that Summerfield rezone the property described below from the \_\_\_\_\_ zoning district to the \_\_\_\_\_ zoning district. Said property is located in \_\_\_\_\_ Township, consists of \_\_\_\_\_ total acres, and is further referenced by the Guilford County Tax Department as:

tax parcel number \_\_\_\_\_ tax parcel number \_\_\_\_\_

tax parcel number \_\_\_\_\_ tax parcel number \_\_\_\_\_

tax parcel number \_\_\_\_\_ tax parcel number \_\_\_\_\_

(If needed, attach a single sheet specifying additional tax parcels.)

### APPLICATION MATERIALS CHECKLIST:

- A completed and signed application form;
- Application fee;
- A Development Plan for residential rezonings;
- Legal description of the property;
- Environmental Inventory (check with Planning Department for specific requirements).

### CHECK ONE:

- Property requested for rezoning is an entire parcel or parcels as shown on the Guilford County Tax Map.
- Property requested for rezoning is a portion of a parcel or parcels as shown on the Guilford County Tax Map; a written legal description of the property and a map are attached.



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**CHECK ONE:**

- The applicant is the property owner(s).
- The applicant is an agent representing the property owner(s); the letter of property owner permission is attached.
- The applicant has an option to purchase or lease the property; a copy of the offer to purchase or lease is attached (financial figures may be deleted).
- The applicant has no connection to the property owner and is requesting a third-party rezoning.

**REQUIRED SIGNATURES**

This Application for General Purpose Rezoning must be signed by the current property owner(s).

*I hereby agree to conform to all applicable laws of the State of North Carolina, Guilford County, and the Town of Summerfield and certify that the information provided is complete and accurate to the best of my knowledge. I acknowledge that by filing this application, representatives from the Town of Summerfield may enter the subject property for the purpose of investigation and analysis of this request.*

owner #1 signature \_\_\_\_\_ date \_\_\_\_\_

owner #2 signature (if applicable) \_\_\_\_\_ date \_\_\_\_\_

owner #3 signature (if applicable) \_\_\_\_\_ date \_\_\_\_\_

Town of Summerfield approval \_\_\_\_\_ date \_\_\_\_\_

**ADDITIONAL TAX MAP REFERENCES:**

Further referenced on the Guilford County Tax Maps as:

tax parcel number \_\_\_\_\_ tax parcel number \_\_\_\_\_

tax parcel number \_\_\_\_\_ tax parcel number \_\_\_\_\_

tax parcel number \_\_\_\_\_ tax parcel number \_\_\_\_\_



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**ADDITIONAL REZONING QUESTIONS:**

1. *Type of use and improvement proposed:* \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

2. *Do substantial reasons exist which prevent the subject property from being used in accord with the current Zoning classification?* \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

3. *State the way in which the proposed change will be appropriate and desirable to the Town of Summerfield and what effect the proposed change will have upon the immediate neighborhood.* \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

4. *What changing conditions make the passage of this proposed amendment necessary?* \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

5. *Are there circumstances that justify the proposed change? If so, state them.* \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

6. *How does the proposed zoning change affirm the policy(ies) of the Town of Summerfield Comprehensive Plan?* \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

