

Rezoning Application Packet

Application Checklist:

An application is not considered complete until all applicable materials are submitted.

- Application
- Signed Authorization from the Property Owner (if the applicant is not the property owner)
- LLC/Partnership Signing Authorization (if the property is owned by a corporation)
- Copy of Recorded Deed
- Copy of Recorded Plat

Once the application has been reviewed and is deemed complete, you will be sent an invoice to pay the required fee. The fee is \$200 per request. Checks shall be made payable to Calhoun County.



Zoning Map Amendment (Rezoning) Application

If this application is filed by the property owner(s), all property owners must sign. If the applicant is not an owner, the property owner(s) must also execute and attach a Designation of Agent form.

rezoned: from				
Reason for rezoning requ	iest:			
APPLICANT(S):				
Name(s):				
Address: Zip Code:				
Telephone: Cell:Email:	Work:		Fax:	
PROPERTY OWNER(S): If different than Applican Name(s):	· ,			
Address:				
City:	Zip Code:	_		
Telephone: Cell:	Work:	Home:	Email:	
Additional information a	ttachedYes/N	No		
PROPERTY INFORMATION	N:			
Address:				
Subdivision:				
Tax Map No.:			_	
Zoning Dist.:	Zoning Map Page: _			
Area in acres:			_	
Dimensions:				
Current use:				
Proposed use:			<u> </u>	
Is the property subject to Please attach a copy of a				
Final action:				