



REZONING REQUEST PROCEDURE

IMPORTANT DATES

Date rezoning application due in the Planning Department: _____

Date of Planning Commission meeting: _____

Time: _____ 3:15 p.m. _____

Location: City Council Chambers
First Floor - City Hall
402 Lee Street NE
Decatur, AL 35601

Date of City Council meeting: _____

APPLICATION REQUIREMENTS

An applicant for rezoning shall:

1. Complete all items and submit to the Planning Department the original "Rezoning Applications (attached).
2. Submit a copy of the deed to the property showing the name of the current owner and the correct legal description. **Email the legal description to planningcommissionapplications@decatur-al.gov in a ".docx or .pdf" format.**
3. Pay to the City of Decatur a **\$300.00** processing fee (non-refundable) for advertising in the local newspaper.
4. Submit the above items (21) twenty-one days prior to review by the Planning Commission (next to the last Tuesday of each month).
5. Be present or have a representative present at all Planning Commission and/or City Council meetings, if said rezoning is on the agenda.

Should you have any questions concerning the rezoning application or the time schedule, please contact the Planning Department at 256-341-4720 or come by the office located in the City Hall Annex, 308 Cain St. N.E. Decatur, AL.



REZONING APPLICATION

FILE NO. _____ CONTROL NO. _____ DATE _____

To: Planning Commission for the City of Decatur, Alabama

Gentlemen:

I hereby petition the City of Decatur to amend the Zoning Ordinance of the City of Decatur as hereinafter shown:

DESCRIPTION OF PROPERTY

Address of Property: _____

Lot _____ Block _____ Plat _____

Metes & Bounds: _____ required & attached _____ not required
Drawing (1" = 200') _____ required & attached _____ not required

Please provide three (3) state plane coordinates. _____

ZONING

Present Zoning: _____ District

Requested Zoning: _____ District

SUPPORTING DATA

Proposed Use of Land: _____

Why petitioner feels change is justified: _____

Circulated petition: _____ made and attached _____ not made

OTHER INFORMATION

Name, Title, and full address of:

Property Owner: _____

Petitioner: _____

Relationship of Petitioner to Property Owner: _____

I certify the above information is true.

Signature _____

Phone No. _____