City of Kurten

Zoning Map Amendment Form

NOTE: Please print all information requested below.

Number	
Date	Name of Applicant
	Applicant's Signature
	Current Address
	Phone
Address of the property you	seek to have rezoned
Legal description of the pro	perty
Legal capacity in which you	are applying for this rezoning:
Owner	Representative of the owner Other (explain below)
Current zoning classification	n of the property:
	tion:
Reasons supporting your re	quested rezoning:
	•
Current land use activities a	butting the subject property:
O. d. W. d.	

	Public hearing date for the Planning & Zoning Commission
	Date notice sent to abutting property owners (At least 10 days before the public hearing date.)
	Date notice published in a local newspaper
Planning Commission Rep	port Reasons supporting the recommendations of the Planning & Zoning Commission:
Protest by 20% or more of	f abutting property owners? Yes No Public hearing date for the City Council.
	Date notice published in a local newspaper. (Not less than 15 days before the public hearing date.)
Decision of the City Coun	cil: Rezoning request approved Rezoning request denied
Reasons given for the City	/ Council's decision: