

**CITY OF ALBEMARLE**  
**ZONING MAP CHANGE APPLICATION**  
**(Submit in Duplicate)**

**Application #** \_\_\_\_\_

**Date of Application** \_\_\_\_\_

**I. Applicant / Owner Information**

A. Applicant's Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Connection to Property if not Owner \_\_\_\_\_

B. Owner's Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

**II. Property Information**

A. Property Location: 

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B. Tax Record Number: \_\_\_\_\_

C. Deed Book \_\_\_\_\_ Page \_\_\_\_\_

D. Existing Zoning \_\_\_\_\_ Proposed Zoning \_\_\_\_\_

E. Existing Use \_\_\_\_\_ Proposed Use \_\_\_\_\_

F. Property Size \_\_\_\_\_ (Sq. Ft./Acres)

**III. Other Required Information (Attach the Following)**

A. The application shall be accompanied by two (2) copies of a map, drawn to an appropriate scale. The map shall contain the following:

1. All property lines with dimensions, including a north arrow.
2. Adjoining streets with rights-of-way and paving widths.
3. The location of all structures and the use of all land.
4. Zoning classification of all abutting zoning districts.
5. Comprehensive site plan if the application is for commercial, industrial, or multi-family development.

- B. A statement regarding the changing conditions, if any, in the area or in the city generally, that makes the proposed amendment reasonably necessary to the promotion of the public health, safety, and general welfare.

- C. Does this zone change request also contain a request for a conditional use permit?      Yes                      No. If yes, please attach Conditional Use Permit application.

**IV.** Application processing fee. Attach check, payable to the City of Albemarle in the amount of \_\_\_\_\_.

**V.** Applicant must attend all meetings.

I, the undersigned owner or authorized representative, hereby submit this application with the attached information. The information and documents provided are complete and accurate to the best of my knowledge.

\_\_\_\_\_  
DATE

\_\_\_\_\_  
SIGNATURE OF OWNER OR AUTHORIZED REPRESENTATIVE

**(The Following Information is to be Completed by the Zoning Administrator)**

**RECOMMENDATIONS OF THE PLANNING BOARD:**

**PUBLIC HEARING DATE:** \_\_\_\_\_

Notice of Public Hearing Published in the Stanly News and Press on: \_\_\_\_\_

Notices to Applicant and Adjoining Property Owners Mailed on: \_\_\_\_\_  
(Verification Attached)

Sign Posted On: \_\_\_\_\_

Action Taken by City Council:

Notification of Action Mailed to Applicant On: \_\_\_\_\_  
(Notification Attached)