

Elkton Planning Commission
City of Elkton, Kentucky
PO Box 578 • Elkton, KY 42220 • 270-265-9877
www.elktonky.com

Application for Zoning Map or Ordinance Text Amendment

<u>Owner Information</u>	
Property Owner's Name _____	Date _____
Property Address _____	
Mailing Address _____	

<u>Please Mark the Change Being Requested:</u>	<u>Fee:</u>
____ Zoning Map Amendment	\$150
____ Zoning Ordinance Text Amendment	\$100

Please note that either request requires a public hearing by the Planning Commission and publication and notice of the public hearing as required by state law.

Specific reason request is being made: _____

For Zoning Ordinance Text Amendment:

Attach a copy of the current Zoning Ordinance text with the requested changes clearly marked.

For Zoning Map Amendment:

Current Zoning Code: _____

Requested Zoning Code: _____

The following items MUST be returned with the completed application for a Zoning Map Amendment:

1. A copy of current survey and/or plats with a scaled sketch of the lot boundaries showing the closest streets, or a print out of the lot and adjoining property owners from the PVA. A copy of the deed description would be helpful but is not required.
2. You must attach a complete list of all adjoining property owners, including property owner name, physical address and mailing address.

Note: Adjoining properties includes any properties that touch any portion of the property proposed for zoning amendment including across any streets and/or alleys. Records maintained by the property valuation administrator should be relied upon conclusively to determine the identity and address of the owner. By turning in a completed application and list of adjoining property owners, you are certifying that the list is complete and accurate. (As required by law, a notice of the proposed change must be posted on the property, published in the local newspaper, and mailed to adjoining property owners at least fourteen (14) days in advance of the scheduled public hearing.)

I/We hereby make the above completed application to request a meeting of the Elkton Planning Commission for the purpose of making the above changes.

Signature of Property Owner/Applicant

Official Use Only:

Date Completed Application Filed: _____

Application Fee Paid \$ _____ Date Paid: _____

Date of Scheduled Hearing: _____

Date Published: _____ Publication: _____

Date Notice Mailed (If necessary. Attach Copies of Notices): _____

Date Sign Posted on Property (if necessary): _____

City Clerk