



Rezoning
Checklist and Submission Requirements

-- A completed Project Application must accompany this checklist. --

PROJECT NAME: _____

PROPERTY INFORMATION:

Provide the following information for each parcel in the rezoning request. If more than one zoning classification is requested, provide the acreage for each zoning district. Attach additional sheets if necessary.

Table with 5 columns: Existing Zoning, Proposed Zoning, Current Use, Proposed Use, Area in square feet or acres. It contains three empty rows for data entry.

SUBMITTAL REQUIREMENTS:

Site Location (general location if no assigned address): _____

Existing Future Land Use Map Designation: _____

Proposed Future Land Use Map Designation (if applicable): _____

Is this rezoning being requested to correct a zoning violation? Yes: _____ No: _____

Are there existing structures on the property being rezoned? Yes: _____ No: _____

If yes, please describe:

Provide the legal description for each zoning district included in request. Email a digital copy (MS Word) to planning@cityofmarion.org as well.

Provide an exhibit clearly indicating property to be rezoned, including the existing zoning district and proposed zoning district. Nearby streets, property lines, existing zoning districts within 600 feet of the property and other signification features which may have a bearing upon the request shall also be included.

Rezoning Checklist and Submission Requirements *(continued)*

State why the rezoning request is necessary. (use additional sheets if necessary)

Briefly describe how the project will be designed to be compatible with adjoining development and any applicable plan policies. (use additional sheets if necessary)

IMPORTANT DATES AND TIMES*:

- The deadline for Planning and Zoning Commission submittals is the first business day of the month for the following month's meeting.
- The Planning and Zoning Commission meets at 6:00 p.m. on the second Tuesday of every month.
- The Marion City Council meets at 5:30 p.m. on the first Thursday of the first full week of the month and the third Thursday of every month.

*Meeting dates and times are subject to change and may be found on the City of Marion website.

ALL OWNERS MUST PROVIDE A SIGNATURE FOR THE REZONING REQUEST:

Signature of owner: _____ Date: _____

Please print name: _____

Signature of owner: _____ Date: _____

Please print name: _____

Signature of owner: _____ Date: _____

Please print name: _____