



## **ZONING MAP AMENDMENT APPLICATION**

### Unincorporated Territory-Douglas County

Application materials must be submitted, in both print and electronic formats, to the Lawrence-Douglas County Planning Office, at the address noted in heading.

*If you are unable to provide the materials in electronic format please contact the Planning Office at 785-832-7700*

Date of Pre-application Meeting:

Planner:

### **PROPERTY INFORMATION**

Project name & description (if applicable):

Total site acreage:

Present zoning:

Proposed zoning:

Present land use:

Proposed land use:

Number and description of existing structures and improvements:

Legal description

*(May be attached as separate sheet):*

Project address/General location:

### **PROPERTY OWNER INFORMATION**

Property owner's name:

Property owner's email:

Phone No.:

Property owner's address:

City:

State:

### **APPLICANT'S INFORMATION** *(if different from owner's)*

Applicant's name

Applicant's email:

Phone No.:

Applicant's address:

City:

State:

Please indicate the reason for requesting rezoning. *(Attach additional sheets if needed.)*

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**REVIEW CRITERIA:**

In reviewing and making decisions on proposed zoning map amendments, the Planning Commission and the Board of County Commissioners are required to consider the following criteria. The Zoning Regulations place the burden on the applicant to show that an application complies with such criteria. Please respond to the following criteria to the best of your knowledge. *(Attach additional sheets if needed.)*

1. Describe the character of the area:

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2. Discuss the suitability of the property to the uses to which it is restricted under the current zoning:

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3. How long has the property remained vacant as zoned? \_\_\_\_\_

4. To what extent will the removal of restrictions detrimentally affect nearby properties?

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5. What gain would there be to the public health, safety, and welfare due to the denial of the application as compared to the hardship imposed upon the landowner due to the denial of the application?

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6. How does the rezoning request conform to the comprehensive plan?

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7. How does the rezoning request comply with the adopted area or sector plans for the area?

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8. (If rezoning from the AG-1 District) What is the suitability of the property for agricultural uses?

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9. What impact would the rezoning have on environmentally sensitive lands in the area?

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**SIGNATURES**

*To be considered complete, the application must be signed by the owner of the property, or an owner authorization form must accompany the application.*

I/We, the undersigned am/are the **(owner(s)), (duly authorized agent)**, *(Circle One)* of the aforementioned property. By execution of my/our signature, I/we do hereby officially apply for rezoning as indicated above.

Signature: \_\_\_\_\_ Date \_\_\_\_\_

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date \_\_\_\_\_

Printed Name: \_\_\_\_\_

**Note: If signing by agent submit Owner Authorization Form, pg 5**

**UTILITY COMPANIES AND OTHER REVIEW AGENCIES**

**WATER:**

- City Water
- Rural Water: RWD # \_\_\_\_\_ No. of meters \_\_\_\_\_
- Well Water

**WASTE MANAGEMENT:**

- Septic System
- Sanitary Sewer

**ELECTRIC:**

- KCP&L
- Kaw Valley Electric
- Westar
- Other

**TELEPHONE:**

- AT&T/Southwestern Bell
- Sprint/Embarq
- Other \_\_\_\_\_

**GAS COMPANY AND/OR GAS LINES CROSSING PROPERTY**

- Black Hills Energy/Aquila
- Atmos Energy (aka: Greeley Gas, United Cities Gas Co.)
- Kansas Gas Service
- Magellan Midstream Partners
- Southern Star Central Gas
- Williams Pipeline Co.
- Other \_\_\_\_\_

List township the property is in:

List fire district the property is in:

Is property adjacent to State or Federal Highway?  yes  no

Is property located within a drainage district?  yes  no

If yes, which drainage district:

- Douglas County - Kaw
- Wakarusa - Kaw
- Wakarusa – Haskell - Eudora

Is property located within the floodplain?  yes  no

Is property located within 3 miles of one of the following cities?

- Baldwin City
- Eudora
- Lecompton

(PLEASE ATTACH COPY OF SURVEY IF AVAILABLE.)

