

REZONE CHECKLIST

 PETITIONER'S NAME

 PROPERTY OWNER'S NAME

 STREET ADDRESS

 STREET ADDRESS

 CITY STATE ZIP

 CITY STATE ZIP

 PHONE

 PHONE

 FAX

LEDGER NO. _____

INITIAL	TASKS	COMMENTS
_____	Collect Petition & Fees	_____
_____	Collect Ownership Plat & Legal Description	_____
_____	Collect Development Plan (if rezoning to a commercial zone)	_____
_____	Ownership Verified	_____
_____	Adjacent Property Owners Notified	_____
STAFF REVIEW:	Current Planner _____ Police _____	City Engineer _____ Fire Marshall _____ Other: _____
_____	Review Notices Sent	_____
_____	Planning Commission Recommendation	_____
_____	City Council Public Hearing	Date: _____
_____	Advertise Public Hearing	Date: _____
_____	Hearing Notices to Property Owners	_____
_____	Ordinance Prepared	No. _____
_____	City Council	Approved/Denied _____ Date: _____
_____	Copy of Ordinance to File	_____