



Zoning Text Amendment Checklist

So that we may efficiently review your project in a timely manner, it is important that all required documents and fees listed on the "Submittal Checklist" below are submitted with your application. Please either bring this application to the address above or email to bstanley@kannapolisnc.gov. The fees may also be paid online with a link provided by staff.

APPLICANT

Applicant: _____

SUBMITTAL CHECKLIST

Pre-Application Meeting
Zoning Text Amendment Checklist and Application – Complete with all required signatures
Fee: \$400.00

PROCESS INFORMATION

Public Notification: This is a legislative process that requires a public hearing and public notification including newspaper notice, first-class mailed notice to adjacent property owners and a sign posted prominently on the property (Section 2.4.F of the KDO).

Review Process: All applications will be reviewed for compliance and then forwarded to the Planning and Zoning Commission for consideration at a public hearing which is held monthly on the third Tuesday at 6:00pm in City Hall Laureate Center. **The pre-application meeting, submittal of application, and payment of fees, must be completed prior to scheduling the public hearing. Please review Section 2.4.D. of the KDO.**

Action by Planning and Zoning Commission: The Commission shall consider the text amendment request and make a recommendation to City Council in accordance with Section 2.4.G. of the KDO.

Scope of Approval: City Council may approve or deny the request in accordance with Section 2.5.A(1).

By signing below I acknowledge that I have reviewed the Submittal Checklist and have included the required submittal items and reviewed them for completeness and accuracy. I also acknowledge that my application will be rejected if incomplete.

Applicant's Signature: _____

Date: _____



Planning Department
401 Laureate Way
Kannapolis, NC 28081
704.920.4350

ZONING TEXT AMENDMENT APPLICATION

Approval authority – Planning and Zoning Commission

Applicant Contact Information

Name: _____

Phone: _____

Address: _____

Email: _____

In the space provided below, or on a separate sheet, present your requested text for the Ordinance provisions in question:

State your reasons for amending the text of the Ordinance:

I certify that all of the information presented in this application is accurate to the best of my knowledge, information, and belief.

Applicant Signature

Date

Property Owner Signature

Date