APPLICATION FOR AMENDMENT TO THE OFFICIAL ZONING MAP (REZONING)

VILLAGE OF FAIRMONT CITY + 2601 N. 41ST STREET + FAIRMONT CITY, IL 62201 + (618) 874-6100

Application Number: Fee:	Date Fee Paid:	CREATED 4/03
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IMPORTANT INSTRUCTIONS

The Zoning Code of the Village of Fairmont City divides the community into separate zoning districts. Specific regulations govern each district and how property may be used within that district. At times, a property owner, or a person purchasing a particular property, may wish to have the zoning classification for that property changed. The standards that the Village Board must follow in order to amend the Official Zoning Map are listed in the Zoning Code under Section 1-1560. The applicant must be prepared to prove that the request for an amendment (rezoning) meets the requirements as outlined in that section.

Upon submission of this application, the Zoning Board of Appeals will schedule a public hearing. You will be notified by first class mail of the date and time of the hearing. A notice will also be published. You or a representative may be required to testify and present evidence at that hearing. The members of the Zoning Board of Appeals may question you and require other testimony. In addition, any interested party may testify either in favor of or against your request. Upon completion of the hearing, the Zoning Board of Appeals will forward a recommendation to the Village Board, who then consider your request in conjunction with the recommendation and findings of the Zoning Board of Appeals. If the Village Board votes to amend the Official Zoning Map, they will pass an ordinance at their next meeting, which will officially enact the rezoning.

APPLICANT NAME:			Phone #:				
Address:	:	City:		State:	Zip:		
CHECK IF:	Property Owner	Contract Purchaser	Lessee _	Other (_)	
OWNERS NAME:				_ Phone #: _			
Address:		City:		State:	Zip:		_
ADDRESS OF PRO	PERTY:						
PERMANENT TAX	NUMBER:		_ LOT #:	ZONING	DISTRICT:		
RESIDENTIAL:		K ALL THAT APPLY) Duplex Unipme Modular Hom		amily (# of ur	nits)		
RESIDENTIAL:	Single FamilyManufactured Hol	Duplex Unip	ne				_)
RESIDENTIAL: ACCESSORY USE	Single FamilyManufactured Holes: Garage	Duplex Unip	ne mming Pool	Other (_)
RESIDENTIAL: ACCESSORY USE BUSINESS USES:	Single Family Manufactured Holes: Garage Commercial _	Duplex Unipme Modular Hom Swi	mming Pool	Other (
RESIDENTIAL: ACCESSORY USE BUSINESS USES:	Single Family Manufactured Holes: Garage Commercial _	Duplex Unipme Modular Hom Carport Swi	mming Pool	Other (
RESIDENTIAL: ACCESSORY USE BUSINESS USES: VACANT LOT:	Single Family Manufactured Hotel ES: Garage Commercial _ OTHER USE:	Duplex Unipme Modular Hom Carport Swi	mming Pool	Other (
RESIDENTIAL: ACCESSORY USE BUSINESS USES: VACANT LOT:	Single Family Manufactured Holes: Garage Commercial OTHER USE:	Duplex Unipme Modular Hom Carport Swi	ne mming Pool Home Occupation	_ Other (
RESIDENTIAL: ACCESSORY USE BUSINESS USES: VACANT LOT: PROPOSED USE OF	Single Family Manufactured Holes: Garage Commercial OTHER USE: FPROPERTY: (CHEC	Duplex Unipose Unipose Modular Hom Carport Swing Homeone Houstrial Homeone Houstrian Hous	ne mming Pool Home Occupation	_ Other (
RESIDENTIAL: ACCESSORY USE BUSINESS USES: VACANT LOT: PROPOSED USE OF	Single Family Manufactured Holes: Carage Commercial OTHER USE: FROPERTY: (CHEC Single Family Manufactured Home	Duplex Unipose me Modular Hom Carport Swin Industrial How CK ALL THAT APPLY) Duplex Uniplex	mming Pool Home Occupation x Multi-Fan	_ Other (TYPE:	;)		

COMPLETE ADDITIONAL INFORMATION ON REVERSE SIDE

I hereby request that the above-described prop	perty be rezoned from its current classification to a zoning classification of
, for the f	following reason:

	NAC - 10 - 10 - 10 - 10 - 10 - 10 - 10 - 1
Ask the Zoning Administrator for a photocopy of the have rezoned. Attach it in the box labeled "Reques requesting. District lines should follow lot lines, right	e section of the Official Zoning Map which includes the property you wish ted Zoning". Draw the new zoning district boundary lines that you are it-of-way lines, or other such boundaries.
REQUESTED ZONING	
a service that represent the contract of the c	
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N. N.	
YOU MUST ALSO SUBMIT THE FOLLOWING ATTAC	HMENTS WITH YOUR APPLICATION:
The level description for property in question	
The legal description for property in question	
Any additional documentation which supports y	our request
IN ANY DOCUMENT OR PLANS SUBMITTED HEREW ENTRY IN OR UPON THE PREMISES DESCRIBED HE	F THE ABOVE STATEMENTS AND THE INFORMATION CONTAINED ITH, ARE TRUE AND ACCURATE. I HEREBY CONSENT TO THE EREIN, BY ALL AUTHORIZED OFFICIALS OF THE VILLAGE OF THIS APPLICATION, INSPECTING THE PROPOSED WORK, NOTICES REQUIRED BY ORDINANCE.
	DATE
APPLICANT:	DATE:
OWNER:	DATE: