

APPLICATION FORM

ZONING MAP AMENDMENT
BOONE COUNTY PLANNING COMMISSION

SEVEN (7) COPIES OF SUBMITTED DRAWINGS ARE REQUIRED

(See Boone County Zoning Regulations)

SECTION A (To be completed by applicant)

- 1. Name of Project
2. Location of Project
3. Total Acreage of Site
4. Current Zoning of Site
5. Proposed Zoning (Classification being requested)
6. Proposed Uses (please specify each use)
7. Names of Applicant(s)
8. Address of Applicant(s)
9. Name of Property Owner(s)
10. Address of Property Owner(s)
11. Proposed Building Intensities (please specify)
12. Are there any existing buildings on the site?
13. Deed Book Page No. Group No.
14. Are you also applying for:
15. Have you submitted a Concept Development Plan?
16. Have you had a pre-application meeting with BCPC Staff?
17. Please check the following organizations/agencies which you have discussed the proposed development within the last several months:

18. Project Jurisdiction/Location
_____ Unincorporated Boone County _____ Walton
_____ Florence _____ Union

19. Waiver of 60 Day Time Requirement by Originator for Final Planning Commission Action

_____ Check if Applicable

In accordance with the provisions in KRS 100.211, the applicant(s) and property owner(s) or originators above, hereby waive the 60 day time limit for the Boone County Planning Commission to take final action on my (our) Zoning Map Amendment and/or Concept Development Plan* application. This time limit waiver is considered effective immediately upon receipt by the Boone County Planning Commission and expires on _____.

20. ORIGINAL Property Owner's Signature _____
(Faxed, Photocopied or Scanned Signatures will NOT be Accepted)

ORIGINAL Applicant's Signature _____
(Faxed, Photocopied or Scanned Signatures will NOT be Accepted)

SECTION B (To be completed by BCPC Staff)

1. Date Received _____
2. Review Fee _____
3. Check what has been submitted:

- _____ Application
_____ Fee
_____ Legal Description
_____ Concept Development Plan
_____ Address of Adjoining Property Owners
_____ Number of Copies of Plan Received**

4. _____ Date Application is Administratively Complete as Defined in KRS 100.211
5. Staff Reviewer _____
6. Committee Chairman _____
7. Scheduled Public Hearing Date _____

8. Boone County Planning Commission Action:
_____ Approval
_____ Approval with Conditions
_____ Denial _____ Resolution #

9. Other: _____

Boone County Planning Commission
Boone County Administration Building
2950 Washington Street, Room 317
P.O. Box 958
Burlington, Kentucky 41005
(859) 334-2196 - Phone
(859) 334-2264 - Fax
plancom@boonecountky.org - E-mail
www.boonecountky.org - Web Page

NOTE: An application consists of all fees paid in full, submitted drawings and a completed application form.