



CITY OF PINE BLUFF, ARKANSAS

Re-Zoning Application Form

Address/Location of Property: _____
 Size of Property (acreage): _____ Current Zone: _____
 Ward: _____ Requested Zone: _____
 Assessor's Parcel Number(s) for subject property: _____
 Existing Use: _____ Proposed Use: _____
 Reason for Requesting Zoning Change: _____

Applicant/Agent

Property Owner (Must be filled out if different)

Name: _____
 Address: _____
 Telephone: _____
 Email: _____
 Fax: _____

Name: _____
 Address: _____
 Telephone: _____
 Email: _____
 Fax: _____

Additional information/comments: _____

Applicant / Agent Signature

Date

PROPERTY OWNER(S) / AUTHORIZED AGENT CERTIFICATION: I (We), the undersigned, hereby certify under penalty of perjury that I (we) are the owner(s) of the property that is the subject of this application and I (we) have read this application and consent to its filing. *(If signed by the authorized agent, a letter from each property owner must be provided indicating that the agent is authorized to act on his/her behalf.)*

Signature _____ Date _____

Signature _____ Date _____

Printed Name _____
 Owner _____ or Authorized Agent _____

Printed Name _____
 Owner _____ or Authorized Agent _____

Submission Deadline: _____ Expected Planning Commission Meeting Date: _____

• SEE REVERSE SIDE FOR SUBMISSION REQUIREMENTS •

Submission Deadline: _____ Expected Planning Commission Meeting Date: _____

It is our intention to assist you in making your project a success in a timely manner. Please call if you have any questions or need assistance from the City of Pine Bluff Inspection & Zoning Department, 200 E. 8th Avenue, Pine Bluff, AR 71611 tel: (870)543-1845 fax: (870) 543-1844.

ITEMS REQUIRED WITH SUBMITTAL

NOTE: A submittal must be deemed complete by the zoning official by the 1st of the month to be placed on that month's Planning Commission agenda.

The following items must be received with returned application:

- 1. Clear and legible legal description or copy of deed containing exact legal description.
- 2. 8 1/2" x 11" sketch of the subject property, delineating:
 - a. dimensions of the property;
 - b. approximate location of the buildings with appropriate dimensions;
 - c. land uses of adjacent properties
- 3. Incomplete applications or plats will **NOT** be considered.
- 4. Payment of appropriate fees must accompany application.

Other supporting documentation required with a returned application:

- 5. Property Summary sheet for the subject property. These may be obtained from the Real Estate Division of the Jefferson County Assessor's Office, Jefferson County Courthouse, Barraque & Main Street, Pine Bluff, AR.
- 6. Property Summary sheets for each adjoining property, including those properties across the street(s) from the subject property. The Property Summary sheet must contain the legal description of each property and the recorded owner of each property.
- 7. Addressed, stamped notices (provided by the Zoning Official) to be sent to all property owners of adjoining properties as identified in item 6. above. The property owners who are to be notified as owners shall be those property owners as recorded in the County Assessor's Office as owners. The letter shall state what the existing zoning classification is, what use is being proposed for the property, and the time and place where the public hearing will be held.

FOR OFFICE USE ONLY

(Must be completely filled out by Zoning staff prior to Planning Commission hearing)

APPLICATION FEE: Re-Zoning Application - \$125.00

HEARING NOTICE SIGNS POSTED: One (1) for each 200' of street frontage, up to five (5) maximum \$25.00 per sign

Number of signs required: _____

\$ _____
Amount Paid

Date

Rec'd by

All Property Summary Sheets received? _____

Notice submitted to newspaper? _____

Notice Return Receipts received? _____

Property Posting date: _____

Hearing Notice date: _____

Property Posting Photos in file? _____

Authorized Agent Letters Received from **ALL** Property Owners? (if applicable) _____