



City of Holden

816-732-4811

101 W. 3rd St. Holden, MO 64040

cityclerk@cityofholden.com

ZONING CHANGE REQUEST FORM

DATE: _____

FEE: \$100.00

PETITIONER INFORMATION:

Name: _____

Address: _____

Phone # & Email: _____

1. ACTION REQUESTED

I (WE), THE UNDERSIGNED, REQUEST A HEARING BEFORE THE HOLDEN PLANNING & ZONING COMMISSION REQUESTING THAT CONSIDERATION BE GIVEN TO AN AMENDMENT OF THE HOLDEN ZONING MAP AS FOLLOWS: _____

2. PROPERTY INFORMATION:

a. Names of persons or corporations having a legal or monetary interest in the property: _____

b. Address of property: _____

c. Legal Description: _____

d. Attach a plat map and site plan showing the property layout with all boundary dimensions and the relationship of all adjoining properties.

e. Current Use of the property is: _____

f. Current zoning classification of the property is: _____

g. What is the requested new zoning classification: _____



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3. REASONS AND JUSTIFICATION FOR THE AMENDMENT:

a. State exactly what is intended to be done on or with the property which necessitates a change of the zoning classification. _____

4. DESCRIBE ANY SPECIFIC USES THAT ARE OR ARE NOT ALLOWED ON THE PROPERTY THAT YOU WOULD LIKE TO HAVE ALLOWED OR DISALLOWED. _____

5. IS THE AMENDMENT APPLIED FOR DUE TO UNIQUE CIRCUMSTANCES PRESENT ON YOUR PROPERTY OR TO GENERAL CONDITIONS IN THE AREA? EXPLAIN ANY PECULIAR OR UNIQUE CONDITIONS, AND HOW MANY PROPERTIES IN YOUR AREA ARE SIMILARLY AFFECTED:

6. HOW DO YOU PROPOSE TO MINIMIZE ANY POTENTIAL NEGATIVE IMPACTS WHICH YOUR PROPOSED ACTIVITY MAY CAUSE TO SURROUNDING LAND AND NEIGHBORS?

7. ATTACH ANY ADDITIONAL COMMENTS IN SUPPORT OF THE REQUEST.



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8. FEES: (\$100.00)

This application is to be completed, accompanied by payment, and return to the City Clerk at Holden City Hall at 101 W. 3rd St. Holden, MO 64040, 816-732-4811. If the application is complete, a representative of the Planning & Zoning Commission shall contact the applicant to schedule a public hearing.

9. AFFIDAVIT:

The undersigned acknowledges that if the zoning classification is amended or other decisions favorable to the undersigned are rendered upon this request, the said decision do not relieve the applicant from compliance with all other provisions and requirements of the Holden Zoning Code. The undersigned further affirms that he/she or they is/are the owner, lessee, or other type of interested party such as authorized agent for the owner involved in the request and that the answers and statements herein contain and the information herewith submitted are in all respects true and correct to the best of his/her/their knowledge and belief.

APPLICANT NAME(S) (Print):

APPLICANT(S) SIGNATURE(S):

DATE: _____