



**ZONE CHANGE APPLICATION**  
City of Central Point Planning Department

DATE STAMP  
FOR OFFICE USE ONLY

**APPLICANT INFORMATION:**

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Telephone: Business: \_\_\_\_\_ Residence: \_\_\_\_\_  
E-mail Address: \_\_\_\_\_

**AGENT INFORMATION:**

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Telephone: Business: \_\_\_\_\_ Residence: \_\_\_\_\_  
E-mail Address: \_\_\_\_\_

**OWNER OF RECORD:** (Attach Separate Sheet If More Than One):

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Telephone: Business: \_\_\_\_\_ Residence: \_\_\_\_\_

**PROJECT DESCRIPTION:**

Township: \_\_\_\_\_ Range: \_\_\_\_\_ Section: \_\_\_\_\_ Tax Lot(s): \_\_\_\_\_

**NOTE: For large numbers of parcels, attach additional sheets as needed.**

Existing Zone: \_\_\_\_\_ Proposed Zone: \_\_\_\_\_

For requests to amend the zone text, identify the Code section to be modified (example Chapter 00.00.00): \_\_\_\_\_ Briefly described the purpose for the proposed zone text/zone map amendment: \_\_\_\_\_

**Has a pre-application meeting been held?**  Yes  No

**If yes, pre-application File No.:** \_\_\_\_\_

**NOTE: A pre-application meeting is required for Type III and Type IV applications.**

**REQUIRED SUBMITTALS:**

- Application Form
- Application Fee (See Current Fee Schedule)
- Written Authority from Property Owner if Agent in application process
- Assessor's tax map identifying property to be rezoned
- Map showing affected properties
- Written findings of fact addressing the criteria listed in Section 17.10 CPMC
- Existing text and proposed text (if applicable)
- Mailing labels for all properties within 250-ft project perimeter.

**I HEREBY STATE THAT THE FACTS RELATED IN THE ABOVE APPLICATION AND THE PLANS AND DOCUMENTS SUBMITTED HERewith ARE TRUE, CORRECT, AND ACCURATE TO THE BEST OF MY KNOWLEDGE.**

I certify that I am the:  Property Owner or  Authorized Agent of Owner of Project Site

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

<b><u>FOR PLANNING DEPARTMENT USE ONLY</u></b>
Application Accepted As Complete on: _____
120 <sup>th</sup> Day for Land Use or Limited Land Use Decision: _____
Land Use Case File Number: _____