



*Mineral County*

**APPLICATION FOR AMENDMENT OF THE ZONING REGULATIONS**

Application is hereby made for amendment of Mineral County Zoning Regulations; in support of which the following information is submitted, pursuant to Sections 10.3(A) and 11.2 of said Regulations.

Note: Section I is for Text Amendment and Section II is for Zoning Map Amendment.

I. Text Amendment

a. Identify the text desired to be amended.

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b. Provide the exact wording of the changes requested. Attach separate sheet if necessary.

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c. Provide justification for desired amendment.

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II. Zoning Map Amendment

a. Present Zoning \_\_\_\_\_ Zoning Requested \_\_\_\_\_

b. Provide a legal description of the land to be rezoned.

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- c. Provide a sketch plan drawn to scale, of the area to be rezoned, showing boundaries of the area and existing zoning in all adjacent areas. If applicable, provide a description of buildings and uses proposed together with present uses and buildings within 300 feet of the boundaries of the area of proposed change.
- d. Provide a list of owners of abutting properties and properties located within 300 feet of the boundary of subject property, along with current addresses of all such owners as recorded in the office of the County Assessor.
- e. Justify need for rezoning as required by Section 10.5 of Mineral County Zoning Regulations.

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- f. Provide an estimated time schedule for new construction.

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- g. Justify the need for any new business or industrial zoning.

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- h. Describe the effect the new zoning will have on adjacent areas.

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- i. Identify the ownership of the land for which rezoning is being requested, whether by deed or contract to purchase.

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- j. Does the request comply with all applicable sections of Article 2 of said Regulations? Yes \_\_\_\_\_ No \_\_\_\_\_. List any exceptions.

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- k. Attach any additional information you feel will assist in the evaluation of this request.

I/We submit a nonrefundable processing fee in the amount of \$400.00 (payable to Mineral County) and agree to pay the total actual costs incurred in review and approval or denial of this application including all hearings therefor.

Dated this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_

Printed name of Applicant \_\_\_\_\_

Signature of Applicant \_\_\_\_\_

Address of Applicant \_\_\_\_\_

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