



**TOWN OF DEBEQUE
APPLICATION FOR ZONE DISTRICT
CHANGE OR ZONING TEXT
AMENDMENT
Land Use Regulations - Chapters 14.01 &
14.03**

**Important - Please Read the Following
Information Carefully**

Applicants are encouraged to prepare a separate project narrative to accompany all submitted materials. This narrative should be organized and include a table of contents, page numbers and similar information to facilitate review by town staff and elected/appointed commissions. If a separate narrative is submitted, this application form shall reference the narrative as necessary.

*It is the applicant's responsibility to obtain, read and understand all of the relevant sections of the DeBeque Municipal Code applicable to this procedure. Please keep in mind that more than one section of the code may apply to your application. These regulations are available through the Town of DeBeque municipal offices or on-line <http://debeque.org/>. If you do not understand portions of the Code concerning your application, please ask questions. Failure to complete the application, submit **all** of the required materials or answer questions completely and accurately may result in a delay and processing or a rejection of the application as incomplete. All fees must be paid in full at the time of application. Public meetings or public hearings will **not** be scheduled for an application until it is deemed complete by the Town. Each applicant should take the time necessary to submit a complete and comprehensive application. Town staff is available to direct the applicant to appropriate sources of information.*

APPLICANT

Date: _____

Name: _____ Owner Agent

Mailing Address: _____

Mailing Address for Notices, if different from above: _____

Telephone: _____ Fax: _____ Cell: _____ E-mail: _____

PROPERTY SUBJECT TO APPLICATION

Street Address: _____

Practical Property Description: _____

Legal Description (may attach):

Acres or Square Feet of Parcel _____ Existing Zoning: _____

Surrounding Zoning – North: _____, South: _____, East: _____, West: _____

Requested **revised** zoning or zone text language (**identify specific section of the regulations with the language to be changed**):

Present Use of Subject Property: _____

Uses Surrounding Subject Parcel - North: _____

South: _____

East: _____

West: _____

Property owner(s) if different from applicant (inclusive of mineral owners/lessees):

Name	Mailing Address	Telephone
1.		
2.		
3.		

Attach additional sheets if necessary.

Current list of adjoining and abutting property owners to the subject parcel obtained from the Mesa County Assessor's Office.

Name	Mailing Address	Telephone
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		

Attach additional sheets if necessary.

Description of Proposed Zone District Change - Text Amendment or Zone District Boundary Change (use additional sheets as necessary & include reference(s) to applicable section(s) of the municipal code).

Complete, Incomplete – Comments: _____

The Application Shall Completely Address each of the Following Items (Attach additional sheets if necessary):

Justification for district change. Please clearly state the basis upon which the proposed zoning change is made including a justification for the change. Examples for justification may include the following: Rezoning of subject property is in compliance with the recommendations of the comprehensive plan, or the property was improperly zoned originally or there has been a substantial change in condition and use on the surrounding properties to justify a change of zoning.

Complete, Incomplete – Comments: _____

Designation of the Property in the DeBeque Comprehensive Plan. Identify the applicable classifications or descriptions of the property and recommendations for use, density or other requirements specified in the DeBeque Comprehensive Plan.

Complete, Incomplete – Comments: _____

Terms or conditions of approval applicant may deem necessary or applicable should zone change be approved (may attach additional pages).

Complete, Incomplete – Comments: _____

All information set forth above is true and accurate to the best of my information, knowledge and belief.

Applicant Signature: _____ Date: _____

Additional Applicant Signature (if applicable) _____ Date: _____

For Town Use Only

Application Checklist

- Application deemed complete Date: _____ By: _____
- Vicinity map (3 copies)
- Site plan drawn to scale showing detail of proposed use, access, layout, setbacks, utilities etc. (3 copies)
- Proof of ownership (deed) for subject property.
- Written authorization from property owner(s) authorizing agent to act on their behalf (if applicable)
- List of persons entitled to receive notice of application (including name & mailing address)
- Envelopes (stamped and addressed) for persons entitled to receive notice.
- Fee \$250.00
- Other _____
- Comments: _____

Planning Commission Meeting Date: _____

Date of Planning Commission Report to Board of Trustees: _____

Board of Trustees Public Hearing: _____

Newspaper Notice Publication Date (not less than 15 days prior to hearing): _____

Date Notice Posted on Property (not less than 10 days before the public hearing): _____

Date of individual written notice mailed by first-class mail to all owners of property abutting the parcel disregarding intervening public streets or other public rights-of-way (not less than 10 days before the hearing) or date of hand delivery (not less than 5 days prior to the hearing): _____

For Town Use Only
Date App. Received: _____
Fee \$: _____
Deposit Paid \$: _____
Application Received by: _____