



# Land Use Application Form

**1. Application is made for:**

- |   |                                    |                        |
|---|------------------------------------|------------------------|
| Zoning Map Change                           | Use Permit                         | General Plan Amendment |
| Conceptual Plan Review                      | Preliminary Plat                   | Final Plat             |
| PUD Zoning                                  | Variance                           | Sign                   |
| Street Abandonment                          | Minor Land Division                | Wireless Tower         |
| Appeal                                      | Verification of Non-Conforming Use | Utility Exemption      |
| Site Plan Compatibility Review (Commercial) |                                    |                        |
| Other: _____                                |                                    |                        |

**2. Project Name:** \_\_\_\_\_

Please print or type legibly

**3. Contact information:** *(a list of additional contacts may be attached)*

Owner Name: \_\_\_\_\_ Applicant Name: \_\_\_\_\_

Address: \_\_\_\_\_ Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_ E-Mail: \_\_\_\_\_

**4. Property Description:**

Address or Location: \_\_\_\_\_

Existing Zoning: \_\_\_\_\_ Existing Use: \_\_\_\_\_

Proposed Zoning: \_\_\_\_\_ Proposed Use: \_\_\_\_\_

**5. Purpose:** *(describe intent of this application in 1-2 sentences)*

\_\_\_\_\_  
\_\_\_\_\_

**6. Certification:**

*I certify that I am the lawful owner of the parcel(s) of land affected by this application and hereby consent to this action.*

Owner: \_\_\_\_\_ Date: \_\_\_\_\_ **AND**

*I certify that the information and attachments I have submitted are true and correct to the best of my knowledge. In filing this application, I am acting with the knowledge and consent of the property owner(s). I understand that all materials and fees required by the Town of Camp Verde must be submitted prior to having this application processed.*

Applicant: \_\_\_\_\_ Date: \_\_\_\_\_



# ZONING MAP CHANGE

## Application Instructions

| Staff Use Only      |       |
|---------------------|-------|
| Application Number: | _____ |
| Received By:        | _____ |
| Date:               | _____ |
| Fees Paid:          | _____ |
| Complete:           | Y N   |

*Changes in the official zoning map of the Town of Camp Verde require a recommendation from the Planning & Zoning Commission and approval of The Town Council. Prior to making an application for zoning or for a change in zoning, applicants are encouraged to meet with Town staff to discuss the review process and application requirements.*

### Required for a Zoning Map Change

Complete sets of these documents are required at the time of application.

The required quantities are shown next to each item.

|  | Staff Use<br>only |
|--|-------------------|
| 1. Pre-Application meeting with Staff  | Y N               |
| 2. Application fee as per the current fee code.  | Y N               |
| 3. Completed <b>Land Use Application</b> form  | Y N               |
| 4. Written Legal description of property   | Y N               |
| 5. Directions to property  | Y N               |
| 6. Letter of Intent (see attached)   | Y N               |
| 7. Town Engineer or ADOT approval of site access (if applicable)   | Y N               |
| 8. Approved request to be annexed into the Camp Verde Fire District (if applicable)  | Y N               |
| 9. Site Plan (24" high X 36" wide) <b>(25 folded copies)</b>   | Y N               |
| -vicinity map included   |                   |
| -North arrow, scale (1"=100' or 1"=200'), and date of preparation.   |                   |
| -Subdivision or block and lot name of the area to be zoned (if applicable) at the top of each sheet.                               |                   |
| -Locations and boundaries, including dimensions, of property(s) proposed for zoning or rezoning                                    |                   |
| -Acreage or square footage contained within property proposed for rezoning.  |                   |
| -All existing land uses in the proposed rezoning area  |                   |
| -Zoning and/or existing land uses on all lands adjacent to the proposed rezoning.  |                   |
| -Location and dimensions for all existing right-of-way within, and adjacent to, the rezoning                                       |                   |
| -Names of adjoining subdivisions with lines of abutting lots, and departing property lines of Adjoining properties not subdivided. |                   |
| -Building elevations (if applicable)   |                   |

**Please Note: A request will not be scheduled on an agenda until the application is complete. Submittal of an application does not constitute a complete application until the application is verified as complete and confirmation has been given by the planning division to the applicant verbally. Once an application is deemed complete, payment will be accepted and the application will be scheduled to be heard. The applicant or their designated representative must attend the meeting when their application is being considered. Failure to attend may result in postponement of action by the Planning and Zoning Commission**

10. Neighborhood Meeting Requirements:
 

Property owner or designated agent must provide the Community Development Department the following information on the neighborhood meeting within 10 working days prior to the Planning & Zoning Commission Meeting hearing date.

  - a. A letter notifying neighbors within 300' of the subject property with a description of the copy of the letter sent out to all property owners within 300 feet.
  - b. Post the actual property with meeting date and time. Provide the Planning & Zoning Department with a photo of the posted property.
  - d. The applicant shall prepare a written summary of the meeting by way of affidavit, including:
    1. A sign in sheet of attendees.
    2. A summary of questions and answers which were discussed with the neighbors.
  - e. Affidavit must be completed and notarized.



# Zoning Map Change

*Letter of Intent*

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|   | Staff Use<br>only |
|---|-------------------|
| Written statement describing the proposal<br>and address the following: (1 copy)  | Y N               |
| -Rational for the proposed rezoning.  |                   |
| -Present and future impacts on the existing adjacent zone districts, used and<br>physical character of surrounding area.                                      |                   |
| -Impact of the proposed zone on area accesses and traffic patterns.   |                   |
| -Availability of utilities for any potential development.   |                   |
| -Present and future impacts on public facilities and services including, but not<br>limited to, fire, Police, water, sanitation, roadways, parks and schools. |                   |
| -Relationship between proposal and the Town General Plan.   |                   |
| -Public benefits arising from the proposal.   |                   |

# Affidavit

I \_\_\_\_\_ owner of parcel \_\_\_\_\_ have notified my neighbors within 300' of my residence, by sending letters on \_\_\_\_\_ to notify them of the neighborhood meeting that I conducted on the \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_.

I posted my property with meeting date and time on the \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_.

I \_\_\_\_\_ owner of parcel \_\_\_\_\_ have provided a summary of Neighborhood meeting I conducted to the Planning & Zoning Department of Camp Verde within 15 days attesting to the issues and concerns discussed at the Neighborhood Meeting held on the \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_.

Summary

Statement: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

If Summary statement is too long, attach a copy.

State of Arizona}

County of Yavapai}

\_\_\_\_\_  
Signature of Document Signer No. 1

\_\_\_\_\_  
Signature of Document Signer No. 2

Subscribed and sworn to (or affirmed) before me this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_.

\_\_\_\_\_  
Signature of Notary



