

CITY ZONE CHANGE Pre-Application Statement of Owner(s) and Agent(s)

The owner(s), contract purchasers (if any) and agents (if any) are required to submit this completed form and any attachments along with a completed zone change application packet, including any required fees, for a zone change to be processed by the Planning Division.

1. Present Zoning: _____

2. Written description of the Zone Change Plan including existing and proposed new zoning:

3. Legal Description of Property:

4. Neighborhood Task Force Area: Yes /// No . If Yes, Name of Task Force

5. Roster of persons who attended the pre-application neighborhood meeting: please attach to on line application

6. A brief synopsis of the meeting results including any written minutes or audio recording.

please attach to on line application

7. The undersigned affirm the following:

1) The pre-application neighborhood meeting was held on the _____, day of _____, 20____.

2) The zone change application is based on materials presented at the meeting.

Owner (s):

_____Telephone:_____

Address:

_____Email:_____

Agent (s):

_____Telephone:_____

Address: _____Email: _____

Complete this form and upload to your on-line Zone Change application

CITY ZONE CHANGE APPLICATION FORM

CITY ZONE CHANGE Billings Zone Change # _____ Project # _____

The undersigned as owner(s) of the following described property hereby request a Zone Change as outlined in the **City of Billings** Zoning Regulations.

Present Zoning _____

Proposed Zoning: _____

PARCEL TAX ID# _____ CITY ELECTION WARD _____

Legal Description of Property: _____

Address or General Location (If unknown, contact City Engineering): _____

Size of Parcel (Area square feet or acres): _____

Present Land-Use: _____

Proposed Land-Use: _____

*** Additional information may be required as determined by the Zoning Coordinator in order to fully evaluate the application.

Owner(s) _____

(Record Owner)

(Address)

(Phone Number)

(email)

Agent(s): _____

(Name)

(Address)

(Phone Number)

(Email)

I understand that the filing fee accompanying this application is not refundable, that it pays for the cost of processing, and that the fee does not constitute a payment for a Zone Change. Also, I attest that all the information presented herein is factual and correct.

Signature: _____ Date: _____

(Record Owner – Digital Signature Allowed)