

**FORM IX.**  
**AMENDMENT TO THE ZONING ORDINANCE ("RE-ZONING")**  
**HOMEWOOD PLANNING COMMISSION**

1. Date application filed: \_\_\_\_\_ Requested hearing date: \_\_\_\_\_
2. Applicant: \_\_\_\_\_  
Phone (s): (give several Phone Numbers) \_\_\_\_\_  
Address: \_\_\_\_\_  
City State Zip
3. Owner: \_\_\_\_\_  
Phone(s): \_\_\_\_\_  
Address: \_\_\_\_\_  
City State Zip
4. Attach/give a complete legal description: \_\_\_\_\_  
\_\_\_\_\_
5. Property location: \_\_\_\_\_
6. Tax Map Parcel I.D. Number(s): \_\_\_\_\_
7. Acreage: \_\_\_\_\_
8. Existing Zoning: \_\_\_\_\_ Existing land use: \_\_\_\_\_
9. Proposed Zoning: \_\_\_\_\_ Proposed land use: \_\_\_\_\_
10. Check all required submissions with this application:  
\_\_\_\_\_ Application fee  
\_\_\_\_\_ Reason for the request  
\_\_\_\_\_ Legal description of the subject property  
\_\_\_\_\_ Availability of required utilities  
\_\_\_\_\_ Site plan or preliminary development plan (as required)  
\_\_\_\_\_ Proffer of rezoning conditions (if any)

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

Signature of authorization by Owner: \_\_\_\_\_

=====

**FOR CITY USE ONLY**

\$ \_\_\_\_\_ application fee received on \_\_\_\_\_ by Receipt # \_\_\_\_\_

Application received by: \_\_\_\_\_ on \_\_\_\_\_