

**APPLICATION FOR AMENDMENT TO THE OFFICIAL KENTON COUNTY  
COMPREHENSIVE PLAN AND/OR LOCALLY ADOPTED ZONING ORDINANCE AND  
STAGE I/STAGE II DEVELOPMENT PLAN REVIEWS**

----- *To Be Completed By NKAPC* -----

NKAPC Application Number \_\_\_\_\_ Accepted By \_\_\_\_\_  
KCPC Application Number \_\_\_\_\_ Date Of Acceptance \_\_\_\_\_  
Public Hearing Date \_\_\_\_\_

----- *To Be Completed By Applicant* -----  
(Please Type or Print)

1. APPLICANT Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_

2. OWNER, Name: \_\_\_\_\_  
IF DIFFERENT Address: \_\_\_\_\_  
THAN APPLICANT Phone: \_\_\_\_\_

3. NAME OF APPLICABLE LOCAL UNIT(S) OF GOVERNMENT \_\_\_\_\_

4. IF ZONING MAP AMENDMENT OR STAGE I/STAGE II DEVELOPMENT PLAN REVIEW:

- Location (General Description) \_\_\_\_\_  
\_\_\_\_\_
- Present Zoning Designation \_\_\_\_\_
- Request (Consider Change To) \_\_\_\_\_

5. IF ZONING TEXT AMENDMENT:

- Identify Applicable Chapter, Section, Etc., Being Proposed For Amendment \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- Requested Amendment (Specific wording may be attached, if space is inadequate) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

6. IF AMENDMENT TO THE OFFICIAL KENTON COUNTY COMPREHENSIVE PLAN:

For Map Amendment: Existing Land Use Designation \_\_\_\_\_  
Requested Land Use Designation \_\_\_\_\_

For Text Amendment: Description of the Proposed Amendment – Applicable Chapter, Section,  
Pages(s), etc. (May be attached, if space is inadequate) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

7. THE FOREGOING INFORMATION AND ATTACHMENTS ARE TRUE AND ACCURATE  
TO THE BEST OF MY KNOWLEDGE

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature Of Applicant

----- To Be Completed By Local Administrative Official -----

1. Legislative body in which proposed zone change is located \_\_\_\_\_

2. All local ordinance requirements relative to the submission of this application have been complied with (e.g., the preparation of a development plan, etc.

Yes

No

If no, please specify: \_\_\_\_\_

\_\_\_\_\_

3. Local fees for an application to amend the local zoning ordinance:

■ Fees Paid \_\_\_\_\_

■ Date \_\_\_\_\_

\_\_\_\_\_  
Signature and Title Of Local Administrative Official

----- To Be Completed By Applicant -----

THE FOLLOWING INFORMATION IS REQUIRED TO BE SUBMITTED WITH THE APPLICATION:

TEXT AMENDMENT:

The Chapter And Section Number Of The Proposed Text Amendment

The Specific Wording Of The Proposed Text Amendment

The Application Fee

Additional Information (*optional*)

MAP AMENDMENT/STAGE I DEVELOPMENT PLAN:

A Legal Description Of The Subject Property

The Names And Addresses Of The Owner(s) Of The Properties Adjacent To The Subject Property

A Development Plan (24 Copies) Which Meets The Requirements Of The Local Zoning Ordinance

The Application Fee

Additional Information (*optional*)

STAGE II DEVELOPMENT PLAN:

A Legal Description Of The Subject Property

A Development Plan (3 Copies) Which Meets The Requirements Of The Local Zoning Ordinance

The Application Fee

Additional Information (*optional*)