



# Re-zoning Application

3940 Illinois Street Semmes, AL 36575

Phone (251) 649-5752 · [planning@cityofsemmesal.gov](mailto:planning@cityofsemmesal.gov)

### Office Use Only

Case No.: RZ- _____
Fee- \$300.00 + certified mail
Date Paid: _____
Paid: <input type="checkbox"/> Credit Card <input type="checkbox"/> Cash
<input type="checkbox"/> Check- No. _____
Planning Meeting Date: _____
City Council Meeting Date: _____

Are you the property owner?  YES  NO

*\*If you are not the property owner, you must submit an Owner Authorization Form signed by the property owner  
\*APPLICATION MUST BE FILLED OUT COMPLETELY TO BE CONSIDERED.*

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

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Email: \_\_\_\_\_

### Site Information

Property Owner Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

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

Parcel/Key#: \_\_\_\_\_

Area of property, Sq. Ft, or Acres: \_\_\_\_\_

Present Zoning: \_\_\_\_\_ Requested Zoning: \_\_\_\_\_

Reason for Request/ Intended use of property:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I, the undersigned applicant, understand that payment of these fees does not entitle me to approval of this rezoning and that no refund of these fees will be made. I have reviewed a copy of the applicable zoning regulations. I understand that I must be present at the Planning Commission meeting on the date my case is discussed. The decision regarding this request will be based on the entire range of permitted uses in the requested zoning district, and not solely on the applicant's proposed use(s). **Note:** The Planning Commission will review this application and will make a recommendation to City Council for approval or disapproval.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Planning/Zoning department Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### Submittal Requirements

- \_\_\_\_\_ Application Fee
- \_\_\_\_\_ Agent Authorization Form (if applicant is not the owner)
- \_\_\_\_\_ Survey or boundary map showing exact dimensions of the property to be rezoned
- \_\_\_\_\_ Legal description of property
- \_\_\_\_\_ Adjacent Property Owners List
- \_\_\_\_\_ Copy of Deed
- \_\_\_\_\_ Certified Mail Fee (\$10 per address)