



CITY OF
WILLCOX
ARIZONA

*Cultivate the WEST. Discover HERITAGE.
Encounter CREATION.*

APPLICATION FOR A ZONING AMENDMENT: REZONING

Applicant's Name: _____

Name of All Property Owner(s): _____

Applicant Mailing Address:

Street # Town State Zip code

Subject Property Address (if different than mailing address):

Street # Town State Zip code

Email Address: _____

Phone Number: _____

Tax Parcel Number: _____

Current Zoning Designation: _____

Proposed Zoning Designation: _____

Comprehensive Plan Land Use Category/Growth Area: _____

Comprehensive Plan Land Use Designation: _____

Area Plan Designation (if applicable): _____

Is more than one parcel included in this request? (Select one) ☐ Yes ☐ No

If more than one property owner is involved, all property owners must sign the attached consent signature form.

Are you applying for more than one zoning district on a single parcel? ☐ Yes ☐ No

If property is a new split, or the rezoning request results in more than one zoning district on any tax parcel, then a copy of a survey and associated legal description stamped by a surveyor or engineer licensed by the State of Arizona must be attached.

Describe your relationship to this application. (Select one)

☐

I am the property owner

☐

I am an authorized agent for the property owner

If the applicant is not the property owner, please attach a notarized letter of authorization to this application.

The Purpose of Re-Zoning

The purpose of zoning is to guide the development of land in accordance with the City's General Plan, and to promote the public health, safety and general welfare of the City residents. Zoning districts specify permitted land uses, minimum lot sizes, and certain site development standards such as setbacks and screening. When property is rezoned, all uses permitted within the new district can be permitted on the rezoned parcel.

What is the Process?

1. Pre-application meeting with City staff.
2. Citizen Review Process – the applicant must send notice to all property owners within a radius of no less than 300 feet of the subject parcel(s), as shown on the most recent available records of the last property tax assessment. The Applicant is also required to hold a public meeting.
3. Application Submittal
4. Technical review by relevant internal staff and external agencies
5. Public Hearing – Planning and Zoning Commission (Recommendation City Council)
6. Public Hearing – City Council (Approval or Denial)

Required Submittals

1. This application
2. Citizen Review Summary
3. Land use/concept plan -drawn to scale showing the existing and proposed District boundaries and an accurate legal description of the area being petitioned for amendment. See our website for an example plan.
4. Letter of Authorization (for authorized agents, if applicable)
5. Copy of survey with an associated legal description (if more than one zoning district is requested on a single parcel, if applicable)
6. Processing Fee

Please state the reason for this request and why it should be supported.

Is this request consistent with all deed restrictions or private covenants in effect for this property?

☐

Yes

☐

No

☐

Not applicable (no deed restrictions or covenants)

Describe all **existing** structures/uses present on the subject parcel. Note: the size and location of existing structures must be shown on the accompanying site plan.

Describe all **proposed** structures/uses on the parcel that to be placed on the parcel. Note: the size and location of proposed structures must be shown on the accompanying site plan.

Which streets or easements will be used for traffic entering or exiting the property? (Please label on the accompanying plan)

What impact will this have on the traffic volume of roads serving this subject property?

How many driveway cuts are proposed along streets or easements to allow site access? State whether this is an increase/decrease and whether any existing cuts will need relocation.

Will this rezoning encourage/result in the use of any residential street for through traffic to and from the proposed District? Note: this only applies to rezonings to GB, LI, or HI. Rezonings to any other district should select "not applicable."

☐ Yes ☐ No ☐ Not applicable

Does the subject parcel have site access onto a major road?

☐ Yes ☐ No

Please indicate whether the subject property occurs within the following:

- ☐ Within the Sierra Vista Sub-Watershed Overlay Zone
- ☐ Within two miles of the San Pedro Riparian National Conservation Area
- ☐ Within one mile of the Babocomari River
- ☐ None of the Above

If the subject property is within one of the previously mentioned zones, are you interested in a voluntary retirement of development rights in exchange for a concomitant density increases elsewhere in the County?

☐ Yes ☐ No

Please describe your citizen review process (if applicable). Specifically, state whether you received any responses to your mailed notice or public meeting. Explain how your rezoning application has incorporated the feedback you received.

Identify the utility company/service provider for each of the following services and state if additional provisions or future connections are required in the space below.

Service Provider	Service Provider	Additional Provisions Required
Water/Well		
Sewer/Septic		
Electricity		
Natural Gas		
Telephone		
Fire Protection		
Waste Disposal		

Can the subject parcel accommodate typical uses within the proposed zoning district in full compliance with all applicable site development standards? Explain.

Will any adjacent parcels be reduced in size or altered in shape as a result of this amendment? If so, will they remain capable of reasonable future development in full compliance with the Zoning Regulations?

Is there a significant amount of nonconforming uses in the area currently? Will this amendment result in additional nonconforming lots or uses in the area?

Is the proposed zoning adjacent to, or near, other parcels with the same zoning designation? Explain.

Is the proposed zoning district more intense than the one in place currently? Please select one of the following statements:

- ☐ The proposed District is buffered by an intermediate District of sufficient size to provide a reasonable transition of intensity from the existing area.
- ☐ The proposed District is a reasonable extension of a similar density District within the area;
- ☐ The proposed District provides a transition between an existing less intense District and a more intensive District or an arterial street; or
- ☐ The proposed District is designed to provide adequate protection to the adjacent less intense development in the form of enhanced screening, landscaping, setbacks, large lot size, building orientation, or other design measures.
- ☐ Not applicable, this is a request to a LESS intense zoning district.

Are there any areas of unstable soils, steep slopes, severe washes, floodplains on the subject parcel? If so, please indicate their location on the concept plan. Indicate how these areas will be protected from future development.

Water Use:

Estimate the total gallons of water needed for the proposed use: per day _____ per year _____

Please indicate your water source. _____

If your property is served by a private well, show the existing or proposed location on the site plan.

List any strategies you will employ, on site, to minimize water use, recycle water, and/or enhance onsite natural recharge.

Do you anticipate the use of any hazardous or dangerous materials? If yes, please complete a "Hazardous or Polluting Materials Attachment" and attach it to this application.

☐ Yes

☐ No

The undersigned, do hereby file this application with the Cochise County Planning and Zoning Commission. I certify that, to the best of my knowledge, all the information submitted herein and in the attachments is correct. I hereby authorize the Cochise County Planning Department staff to enter the property herein described for the purpose of conducting a field visit.

Applicant Signature

Date

The following form **must** be completed where there are multiple property owners or multiple parcels subject to the request.

I, the undersigned owner of record of property which lies within the area of the proposed rezoning set forth in the attached application, do hereby consent to the proposed change of zoning district boundary or reclassification of the property(ies) sought for rezoning. I do hereby certify and declare that I was afforded an opportunity to read the full and complete application prior to affixing by signature hereon.

Consent Signature Form

Parcel Number	Owner of Record, Printed Name and Address	Signature	Date