CITY OF DELANO

Community Development Department
1005 Eleventh Avenue
P.O. Box 3010
Delano, California 93216
(661) 721-3340

APPLICATION FOR ZONE AMENDMENT

BE GRANTED A ZONE CHANGE ON PROPERTY LOCATED AT:

Property Address or Location: _____

_____

_____

Assessor's Parcel Number(s): _____

Legal Description of property(s): _____

_____

_____

General Plan Land Use Designation: _____

_____

Zoning District : _____

_____

Proposed Zoning District :_____

_____

☐ Copy of map or plot of proposed Zone Amendment.

☐ Environmental Assessment Form.

PLANNING STAFF REVIEW OF EACH ZONE AMENDMENT APPLICATION WILL INVOLVE CONSIDERATION OF THE FOLLOWING FACTORS:

1. The zone change application is consistent with the City's General Plan.
2. The request complies with the California Environmental Quality Act.
3. The proposed zone change is consistent with the general nature of the surrounding area.

The Planning Commission will consider all aspects of the Zone Amendment application before making a determination to approve, conditionally approve, or deny the request. The ruling of the Planning Commission is subject to appeal with the City Council.

APPLICANT'S SIGNATURE AND DATE INDICATES COMPLETION AND INCORPORATION OF THE ABOVE MENTIONED ITEMS INTO THIS ZONE AMENDMENT APPLICATION.

I certify that I am the record owner or authorized agent and that the information filed is true and correct to the best of my knowledge.

Applicant or Legal Agent	Date
Property Owner	Date

Processing: In order to expedite processing of this Zone Amendment Application, and to eliminate unnecessary delays to the applicant, Planning Staff will not accept this application unless all items have been checked off and this application form has been signed and dated.

In the event errors or omissions are discovered, the application will be deemed incomplete and will be returned to the applicant for revision.