



REQUEST FOR ZONE CHANGE

OWNER'S NAME(S) _____
ADDRESS _____
TELEPHONE _____ EMAIL _____

With this application, include 7 copies of 11"x 17" size of plat map showing areas to be rezoned including surrounding area within 300 feet of this property. Property description must be on the map. Your request will be reviewed by the Enoch City Planning Commission, who, if they approve, will hold a required public hearing after a ten (10) day notice is published in the local newspaper, on the City website and at the City Office. The area to be re- zoned will also be posted with signs to inform the nearby residents. The Planning Commission will then make a recommendation to the City Council, who will deliberate the matter and either approve or deny the zone change by ordinance.

The fee for the zone change request is \$500, payable upon submission of the request and plat maps.

Paid Y/N Check # _____ Date _____

APPLICANT:

By: _____
Owner

By (If multiple owners) _____
Owner

STATE OF UTAH)
)ss.

COUNTY OF IRON)

On this ____ day of _____, 20____, personally appeared before me
_____, who duly acknowledged to me that
he/she/they are the owners of this property and that he/she/they signed the foregoing
document in such capacity.

WITNESS my hand and official stamp the date in this certificate first above written:

NOTARY PUBLIC
Address: _____
My Commission Expires _____

