



UDO/CAMA Land Use Plan Amendment Application

I/we, the undersigned, do hereby make application and petition the Jacksonville City Council to amend the:

___ UDO; or
___ CAMA Land Use Plan

In support of this application, the following required facts are shown:

1. Applicant(s): _____
Home Address: _____
Phone Number: _____ Email: _____
2. Text amendment being sought (attach additional sheets if necessary):

3. In support of this text amendment application, discuss one of the following: a. how the requested amendment would promote the health, safety, morals, or general welfare of the community, or b. how circumstances (land use, development, environmental conditions, community facilities, etc.) have changed since the ordinance was adopted (attach additional sheets if necessary).

Signature of Applicant

Date

PRE-SUBMITTAL CONFERENCE

Please discuss your proposal with a Planner before proceeding with an application so that a thorough interpretation of the zoning text is understood. An official zoning map is on display in City Hall during office hours for your general information. A copy of the **UDO or CAMA Land Use Plan** may be obtained from the Planning and Permitting Division for a small fee. They are also posted at the City of Jacksonville website www.jacksonvillenc.gov

*** A completed, thorough and accurate application must be submitted. Omissions or errors in application can result in unnecessary delay and/or voiding of City approval.**