



Application for Rezone
Filing Fee: \$600.00

Applicant Information		
Representing Company:		
Contact Name:	Phone:	
Address:	Fax:	
City:	State:	Zip:
Email:		
Owner Information (if other than applicant)		
Name:	Phone:	
Address:	Fax:	
City:	State:	Zip:
Email:		
Property for Consideration		
Legal Description (i.e. Lot, Block, Subdivision, Division No. or attach a copy of the Meets & Bounds description when applicable):		
Site Address:	Current Zone:	
Comprehensive Land Map Use:	Gross Area (total acres):	
Intent of Rezone		
1. Explain how the proposed change is in accordance with the <i>City of Idaho Falls Comprehensive Plan</i> .		
2. What changes have occurred in the area to justify the request for rezone?		

3. Are there existing land uses in the area similar to the proposed use?

4. Is the site large enough to accommodate required access, parking, landscaping, etc. for the proposed use?

Neighborhood Meeting

Will a neighborhood meeting be held prior to the Planning Commission meeting: If yes, where and when:

Fees

Application Filing Fee(s): Due at time application is submitted
Advertising Fee: \$ 50.00
Application Fee: \$550.00

Signature of Applicant(s)

	Date:
	Date:

AFFIDAVIT OF LEGAL INTEREST

STATE OF IDAHO

COUNTY OF BONNEVILLE



SS

I _____
Name

Address

City

State

Being first duly sworn upon
Oath, depose and say:

Being the owner of record of the property described on the attached sheet, I grant permission to:

Name

Address

To submit the following application pertaining to that property, check all that applies:

- | | |
|---|---|
| <input type="checkbox"/> Preliminary Plat | <input type="checkbox"/> Planned Unit Development |
| <input type="checkbox"/> Final Plat | <input type="checkbox"/> Comprehensive Plan Map Amendment |
| <input type="checkbox"/> Variance | <input type="checkbox"/> Annexation |
| <input type="checkbox"/> Conditional Use Permit | <input type="checkbox"/> Rezone to _____ |

I agree to indemnify, defend and hold the City of Idaho Falls and its employees harmless from any claims to liability resulting from any dispute as to the statements contained herein or as to the ownership of the property which is the subject of the application.

Dated this _____ day of _____, 20_____.

Signature

SUBSCRIBED AND SWORN to before me the day and year first above written.

Notary Public for Idaho

Residing at

My Commission Expires: _____