



Application for Zoning Map Amendment

Development Services
112 Goldsboro Street E., Wilson, NC 27893
PO Box 10, Wilson, NC 27894
252-399-2220
www.wilsonnc.org

The following must be submitted with one [1] copy of a Zoning Map Amendment Application:

1. A filing fee in accordance with the City of Wilson fee schedule
2. A metes and bounds legal description of the property to be rezoned.
3. A map, drawn to an engineer's scale, on 8 1/2 x 11 sheet or larger, showing the following:
 - a. The property, with bearings and distances of property lines as shown.
 - b. A location map drawn to a scale of 1"=400' [if the main map is not drawn to that scale]
 - c. A point of beginning at the nearest intersection of two public streets. Show all street names.
 - d. Date, north arrow, graphic scale.
 - e. Any boundaries of the floodplain or floodway that cross the property.

Property Owner[s]: _____

Mailing Address: _____

Phone: _____ Email: _____

Name of Petitioner: _____

Mailing Address: _____

Phone: _____ Email: _____

Contact Person: _____

Phone: _____ Email: _____

Property Address: _____

Current Zoning District: _____ Proposed Zoning District: _____

PIN: _____ Total Acreage Included in Rezoning: _____

Other Description:

Since the current Zoning Map is the product of careful investigation and analysis, it is presumed to be sound in its present state, the burden of proof of needed change falls upon the petitioners requesting such a change. Any alteration of the Zoning Map must be supported by sound and conclusive reasoning, particularly since a desirable attribute of the Zoning Map is the stability that it creates. In the spaces provided below, provide the facts and arguments that justifies your request for rezoning [attach additional pages if you need to].

Explain why this property should be rezoned:

Explain how this rezoning will conform to the comprehensive plan, or, if it will not, explain why the comprehensive plan should be changed to allow the zoning:

Explain how you think this rezoning will affect the immediate neighborhood:

Explain how you think this rezoning will affect the City as a whole:

Any other facts, arguments, reasons, and/or considerations you may wish to present are welcomed. Please attach them to this application.

CONDITIONAL ZONING DISTRICT REQUESTS ONLY

Condition[s]: In considering an application for a conditional zoning district, the Commissioners shall consider conditions or restrictions associated with the petition, where any limitation to the conditions or standards in the corresponding standard zoning district are proposed. All other requirements of the corresponding district shall be met. List all proposed conditions, including site specific standards, which are proposed in the conditional zoning district request [attach additional sheets if necessary].

Permitted Uses[s]: A petition for a conditional zoning district shall specify the permitted use[s] allowable, where any limitation to the uses allowed in the corresponding standard zoning district is proposed. A conditional zoning district does not provide for additional use permissions; only permitted uses authorized in the corresponding standard zoning district are allowable. All other requirements of the corresponding district shall be met. List such permitted uses below [attach additional sheets if necessary].

CERTIFICATION

I [We], request the rezoning herein described and certify that all of the information presented in this application and in its accompanying attachments is accurate to the best of my [our] knowledge, information, and belief. I [We] also understand that all legal advertisement fees will be my [our] responsibility for payment and that I [we] will be billed at a later date.

Petitioner[s]:

Signature

Date

Print Name

Signature

Date

Print Name

Property Owner[s]:

Signature

Date

Print Name

Signature

Date

Print Name