Lyon County Petition to Amend Zoning District

Lyon County Planning and Zoning Administration, 206 S 2nd Avenue, Rock Rapids, IA 51246
Phone 712-472-8550 Fax 712-472-2829 Email: alewis@co.lyon.ia.us

Applicant (Property Owner):				FOR OFFICE USE ONLY	
Mailing Address:			Permit #	Permit #	
Town, State & Zip:			Card #		
Phone#: Home:	Cell:				
If the applicant is not the owner, attach a statement that the applicant is the authorized agent of the owner.			Permit Fee: \$		
Site Location - E911 Address:(If different from above)			Date Paid:		
Town, State & Zip:			Chk#		
Parcel ID#					
Township Name:	Section #:	Parcel/Lot/Qtr./Qtr.:	Parcel size (acres):		
Current Zoning District:	Current Land Use:				
Proposed Zoning District:	Proposed Land Use:				
 4. Compatibility with Surrounding Area: Demonstrate Demonstrate Protection: Describe the suit for potential development under the request protect environmental resources. 6. Facilities and Services: Describe the impacts transportation, water, water treatment and General Site Plan Required: A General Site Plan, water treatment and petition. The Site Plan shall clearly show the proposition of the property boundaries and proposition. 	evelopment and use of adjactability's and limitation imposted zoning classification. Does of the proposed project on police or fire protection. Which identifies all proposed perty under consideration ar	tent property. posed be the site's natural resources escribe measures to mitigate develor public/private facilities and service d lots and access drawn to scale mund shall show all properties within 5	for the proposed project opment impacts and/or es including, as appropria st be attached and made 00-feet of the property of	e part of this	
Surrounding Owners: Attach a list of names and names to properties on the General Site Plan.	addresses of all property ov	vners of record within 500-feet of th	he property under consid	deration. Note the	
Required Fee: This petition shall be accompanied by a non-refundable Rezoning Fee of \$200, Payable to Lyon County.					
The undersigned Petitioner certifies un	der oath that the foreg	going information is true and	correct.*		
Petitioner *A dated and signed letter of acknowledgment	Date must be included for each	Owner property owner within the area pr	Date oposed for amendment	:	
	For Office Use	Only			
Recommendation by the Zoning Commission	onApprove D	eny Date:	 Chairman		
Action on Petition by the Board of Supervis	orsApprove De	ny Date:			
Date Petition Received: Am	endment Number if Appr	roved: Receipt	Chairman No. \$200) Fee	