

Bancroft City
Application for Rezone

Community Development Services

Date:		
Applicant:		
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 Metes & 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 City of Bancroft Comprehensive Plan
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:
Signature of Applicant(s)