

Of	ficial Use Only
P&Z#:	
Date Rec'd:	
Rec'd By:	
	d: \$

Town of Bolton • 221 South 9th Street, Bolton, NC 28443 • Phone (910) 655-8945 • Fax (910) 655-4326

All applications for rezoning must be complete and accompanied by the rezoning fee of \$25.00. A rezoning application must be filed with the Zoning Administrator no later than ten (10) working days prior to the Planning Board meeting at which the application is to be considered.

Applicants are also encouraged to attend all Planning Board and Board of Aldermen meetings where this application will be considered.

Rezoning, also known as map amendment or zoning amendment, are amendments to the Zoning Ordinance. Article III of the Zoning Ordinance describes the zoning districts, allowed uses, and uses permitted by right within the Town. In Article IV, Section B.3, it describes the requirements of an applicant for a rezoning.

Project Name (if applicable):					
SECTION 1: APPLICANT INFORMATION					
Applicant Name:					
Mailing Address:					
Phone:	Fax:		Email:		
SECTION 2: PROPERTY OWNER INFORMATION (if different from above)					
Owner Name(s):					
Mailing Address:			t .		
Phone:	Fax:	~	Email:		
SECTION 3: PROPERTY INFORMATION					
Street Address and/or Description of Location:		*			
Property #(s):		Total Site Acres or Square Feet:			
Current Zoning District(s):					
Proposed Zoning Change(s):					

SECTION 4: LAND USE COMPATI	BILITY ANALYSIS				
Future Land Use Map designation:					
Is the proposed zoning consistent with the	Land Use Plan? ☐ YES ☐ NO				
Please explain why the proposed zoning is or is not consistent with the Land Use Plan and other adopted					
plans (use additional sheets as necessary):		•			
SECTION 5: STATEMENT OF REA	SONABLENESS				
Please describe why the proposed rezoning	is reasonable, including how it is	appropriate in relation to its			
surroundings and how it benefits the town	and the neighboring properties (us	se additional sheets as necessary):			
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SECTION 6: SUPPLEMENTAL INFORMATION REQUIRED					
Each annexation application must include:	1 1 1 1 1				
<ul> <li>□ An application fee of \$25.00 in cash, m</li> <li>□ If any portion of a proposed zoning dist</li> </ul>	ioney order, or check made payabl trict boundary does not follow an e	e to the Town of Bolton.			
petition must include three (3) paper ma	aps and one (1) digital copy (PDF.	CAD, or GIS file) prepared by			
a licensed surveyor providing bearings and distances of such zoning district boundaries.					
☐ A notarized letter of authorization, if acting as the agent for the property owner(s).					
SECTION 7: APPLICANT/OWNER SIGNATURE					
In filing this Rezoning Application, I hereby certify that I am authorized to submit this application and that all					
information present in this application is accurate to the best of my knowledge, information, and belief.					
G!					
Signature:	Date:				
Official Use Only					
Planning Board Meeting Date:	Recommendation:	Staff:			
Board of Aldermen Meeting Date:	Action:	Staff:			