

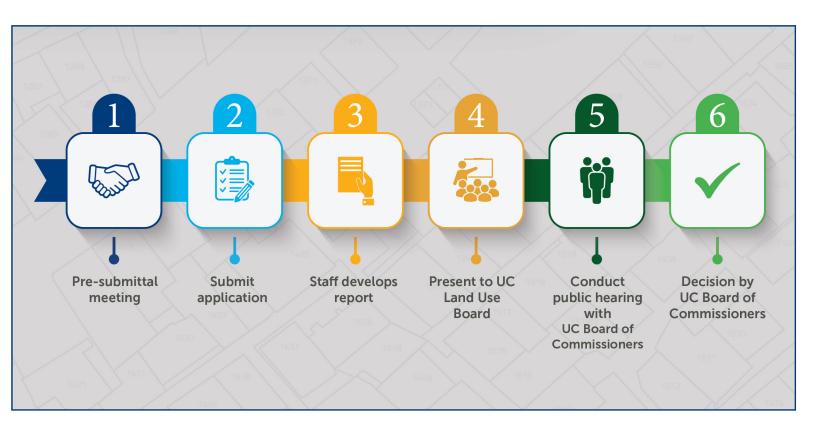
Union County Planning Department

500 N Main Street - Suite 70 Monroe, NC 28112

T 704.283.3565

E UCPlanning@unioncountync.gov

Unincorporated Union County Straight Rezoning Packet



Straight Rezoning Packet Instructions

Union County Planning Department

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- 1. Applicants are required to schedule and attend a preapplication consultation with county planning staff before filing a rezoning application. These informal visits prepare applicants for the process and may help avoid delays. A completed application must include: A letter of intent, and a boundary Survey (acreage, current zoning, location of existing buildings, setbacks)
- 2. The filing fee (\$600), completed application form and other required information must be submitted to the planning office.
- Once all required information is received, county staff will review the proposed rezoning and the planning department will prepare a report and recommendation for presentation to the Land Use Board.
- 4. The Land Use Board will consider the request in a public meeting. At the meeting, those in support of and in opposition to the rezoning will be given a chance to present their views. Then, the Land Use Board will vote to recommend that the Board of Commissioners approve or disapprove the request.
- 5. Before the Board of Commissioners can consider whether to approve a rezoning, notice must be published in a local newspaper. Signs will be posted on the property and public notice letters mailed to nearby property owners.
- 6. Once required notice has been provided, the Board of Commissioners will hold a hearing, again offering an opportunity to hear from the applicant and others who wish to speak about the rezoning request. After the hearing, the Board of Commissioners will vote to approve or disapprove the rezoning request.

Preapplication Meeting

Application Filing

Administrator Review

Land Use Board Review/Recommendation

Public Hearing Notice (Newspaper, Mail, Sign)

County Commission Hearing and Final Action





Application for Straight Rezoning

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General Information					
Project Address	City _.		State_		_ Zip
Tax Parcel ID	Current Zoning Designation			Total	Acres
Proposed Zoning Designat	ion	_ Date Subn	nitted		_
Project Description or Inter	nt of Rezoning				
Contact Information					
Applicant Name					
Address	City_		State_		_ Zip
Phone	Fax			_ Email	
Property Owner Name					
Address	City_		State_		_ Zip
Phone	Fax			_ Email	
Applicant's Certification	on				
Signature		Date		Printed Nam	e/Title
Owner's Certification	(include names	and signa	tures of	fall owners	5)
Signature		Date		Printed Nam	
Union County Office L Case Number:		_ Date Rece	eived:		
Amount of Fee (\$600):	Fee Ok: Received by:				

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