

REZONING CRITERIA

1. Consistency with the goals, policies, and future Land Use Plan of Tobacco Township.
If conditions have changed since the Land Use Plan was adopted, the consistency with recent development trends in the area.
2. Compatibility of the site's physical, geological, hydrological and other environmental features with the host of uses permitted in the proposed zoning district.
3. Evidence the applicant cannot receive a reasonable return on investment through developing the property with one of the uses permitted under the current zoning.
4. The compatibility of all the potential uses allowed in the proposed zoning district with the surrounding uses and zoning in terms of land suitability, impacts on the environment, density, nature of use, traffic impact, aesthetics, infrastructure and potential influence on property values.
5. The capacity of township infrastructure and services sufficient to accommodate the uses permitted in the requested district without compromising the "health, safety and welfare" of the township.
6. The capacity of the street system to safely and efficiently accommodate the expected traffic generated by uses permitted in the proposed zoning district.
7. The apparent demand for the types of uses permitted in the proposed zoning district in the township, and surrounding area, in relation to the amount of land in the township, and surrounding area, currently zoned and available to accommodate the demand.
8. The boundaries of the proposed zoning district are sufficient to meet the dimensional regulation for the zoning district listed in the proposed district's regulations.
9. If the rezoning is appropriate, the proposed zoning district shall be more appropriate from the township's perspective than another zoning district.

TOBACCO TOWNSHIP
REZONING APPLICATION

(Shaded areas will be completed by Township officials)

For Office Use Only

RZ # _____

Date Received _____

Fee Paid \$ _____

Public Hearing Date _____

(The Petitioner shall appear in his own behalf (or by representation*) at the Planning Commission meeting. FAILURE TO DO SO SHALL BE SUFFICIENT CAUSE FOR DISMISSAL OF THE PETITION.)

Petitioner: _____
Address: _____
City/State/ZIP: _____
Phone: Day _____ Evening _____
Address where rezoning is requested: _____

Property owner: _____
Address: _____
City/State/ZIP: _____
Phone: _____
Length of ownership: _____
Date of last Land Division (Split): _____

It is desired and requested that the following described property be rezoned from:
_____ to _____
(Current zoning district) (Proposed zoning district)

The proposed use according to the Land Use Plan is: _____

Property Identification Number: _____
Legal description of property: _____

The land area (size) of the subject property is: _____

It is proposed that the property will be developed as follows:

Attach a statement indicating why, in the applicant's opinion:
(1) the change requested is necessary for the preservation and enjoyment of substantial property rights, and
(2) why such changes will not be detrimental to the public welfare, nor the property of other persons located in the vicinity thereof.

I, _____, do hereby certify that the above information (and information contained in any attached documents) are true. I understand that false or misleading statements is cause for terminating the processing of this application or for revoking a rezoning action previously approved.

(Signature of applicant) (Date signed)

(*Basis of representation (i.e, legal representative, owner, option to buy): copy of deed, title and/or option to purchase must be provided at time of application)