



DEVELOPMENT SERVICES DEPARTMENT  
10 FIRST ST. NW  
MASON CITY, IOWA 50401  
641.421.3626

# ZONING TEXT AMENDMENT

## APPLICATION PACKET PLANNING & ZONING COMMISSION and CITY COUNCIL APPROVAL REQUIRED

### GENERAL APPLICATION INSTRUCTIONS

Effective Date: May 1, 2024

#### APPLICATION:

Please complete and submit one (1) copy of **all required materials** included in this packet. Your application **will not** be placed on the Planning & Zoning Commission's next agenda until a complete application is received.

This Application Packet includes an *Application Form* to be filled out and signed by applicant.

#### FILING DEADLINE:

The deadline to file an application for the Planning & Zoning Commission is the 15<sup>th</sup> of each month. Your case will be heard at the following month's meeting. All required information and materials must be filed with the Growth Development & Planning Department by the filing deadline. The filing fee is required at the time the application is submitted.

**FEE:** \$125.00 + \$15 per acre or part thereof for rezoning

#### MEETING TIME AND PLACE:

The Planning & Zoning Commission meets on the second Tuesday of each month at 7:00 PM in the 2<sup>nd</sup> floor conference room at City Hall, 10 First Street NW. The meetings are open to the public.

#### NOTIFICATION:

If the text amendment results from a property specific request, the City will mail a notice to all property owners within 350' of the property for which a text amendment has been filed. This notification enables neighbors an opportunity to learn about your application request. Citizens will also be allowed to present information or comment on the matter at the public meeting. In addition, a public notice will be published in the Globe Gazette and a public notice sign(s) will be posted by the City on the property, if applicable.

# TEXT AMENDMENT

## *Application Form*

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**Applicant:** \_\_\_\_\_

Address: \_\_\_\_\_  
(Street) (City) (State) (Zip)

Telephone: \_\_\_\_\_  
(Home) (Business)

Email address: \_\_\_\_\_

**Contact Person, if different:** \_\_\_\_\_

Address: \_\_\_\_\_  
(Street) (City) (State) (Zip)

Telephone: \_\_\_\_\_  
(Home) (Business)

Email address: \_\_\_\_\_

**Property Address, if text amendment is related to specific property:**

\_\_\_\_\_

**Property Owner, if different from Applicant:** \_\_\_\_\_

Address: \_\_\_\_\_  
(Street) (City) (State) (Zip)

Telephone: \_\_\_\_\_

**Subject of Proposed Text Amendment:**

**Code Section for Proposed Text Amendment:**

**Wording of Proposed Text Amendment (use separate sheet if necessary):**

**Reason for Proposed Text Amendment:**

**How will this Proposed Text Amendment benefit the community as a whole?**

**Signature of Applicant**\_\_\_\_\_

Name/Title:\_\_\_\_\_

Address:\_\_\_\_\_

\_\_\_\_\_

Phone No.:\_\_\_\_\_

I hereby authorize the person(s) named below to act as my agent(s) in all matters pertaining to this application.

Name/Title:\_\_\_\_\_

Address:\_\_\_\_\_

\_\_\_\_\_

Phone No.:\_\_\_\_\_