

APPLICATION FOR CHANGE OF ZONING CLASSIFICATION (REZONING)

This is an application for change of zoning classification (rezoning). The form must be completed and filed at the office of the Zoning Administrator in accordance with directions on the accompanying instruction sheet.

AN INCOMPLETE APPLICATION CANNOT BE ACCEPTED.

1. Name of applicant or applicants (owner (s) and/or their agent (s)). All owners of all property requested to be rezoned must be listed on this form.

A. Applicant/Owner Benny L. Key  
Address 105 Lombard Rd. Phone 620-924-5721  
Agent \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_

B. Applicant/Owner Sheryl Key  
Address 105 Lombard Rd. Phone 620-924-5721  
Agent \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_

C. Applicant/Owner \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_  
Agent \_\_\_\_\_  
Address \_\_\_\_\_ Phone \_\_\_\_\_

Signature of Record Land Owner: \_\_\_\_\_  
(Use separate sheet if necessary for names of additional owners/applicants.)

2. The applicant hereby requests a change of zone from Agricultural zoning district to Residential zoning district for property legally described as Lot(s) \_\_\_\_\_ Block(s) \_\_\_\_\_ of the \_\_\_\_\_ Addition.

(Metes and bounds descriptions shall be provided in the space below or on an attached sheet.)

Legal Description: SEC 14 TWP 18 RNG 4  
TRACT DESC: Part N2SE4  
BEG AT A PT 69.74'  
E NW/4 SE4 E 335'S  
597.83' W  
556.67' N 595.50' TO POB  
LESS  
ROW

3. The dimensions of the property are 535' feet by 595' feet and 7.8 acres or \_\_\_\_\_ square feet in area.

4. The general location may be described as: Ag & Wooded Creek  
\_\_\_\_\_  
\_\_\_\_\_

5. I request this change in zoning for the following reasons. (Do not include reference to proposed uses for a rezoning.) Building 30'x60' House  
\_\_\_\_\_  
\_\_\_\_\_

6. I (we), the applicant(s), acknowledge receipt of the instruction sheet explaining the method of submitting this application. I (we) realize that this application cannot be processed unless it is completely filled in; is accompanied by an ariel photo as required in the instruction sheet; and is accompanied by the appropriate fee.

Benny S. Key (Owner)      Sheri A. Key (Owner)

By \_\_\_\_\_  
Authorized Agent (if any)

By \_\_\_\_\_  
Authorized Agent (if any)

7. Office Use Only:

This application was received at the office of the Zoning Administrator at 4:15 (P.M.) on 10-21-06. It has been checked and found to be completed and accompanied by required documents and the appropriate fee of \$75.00.

_____	_____
Planning & Zoning Assistant	Date
<u>Robert A. Straub</u>	<u>10/21/06</u>
Planning & Zoning Director	Date