



**Belgrade City-County Planning Office**

**APPLICATION TO AMEND THE ZONING CODE WITHIN THE CITY OF  
BELGRADE**

The undersigned hereby makes application to re-zone  or amend  the Belgrade Zoning Ordinance as set forth herein.

Name of Applicant: \_\_\_\_\_

Address of Applicant: \_\_\_\_\_

Phone # of Applicant: \_\_\_\_\_

If the request is for a change in Zoning Classification complete the following:

1. Present Zoning: \_\_\_\_\_ Proposed Zoning: \_\_\_\_\_
2. Legal Description of the land to be re-zoned: \_\_\_\_\_
3. Re-zoning request is for the following reason: \_\_\_\_\_

If the request is for a changed to the text, complete the following:

1. Text to be changed is found in Section \_\_\_\_\_ or page \_\_\_\_\_
2. Change text to read: \_\_\_\_\_

(use additional pages if necessary)

3. Explain reason for proposed change: \_\_\_\_\_

(use additional pages if necessary)

In addition to the above, submit a plot plan drawn to scale on paper not larger than 11"x17" which includes all existing and proposed structures and proposed variance measurements, a list of names, mailing addresses, and labels of all property owners within 300ft of the subject property and an **\$1000 filing fee**. **The application will not be considered complete all information is submitted.**

\_\_\_\_\_  
Applicant Signature

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For Office Use Only

Date filed: \_\_\_\_\_ Filing Fee: \_\_\_\_\_

P.Board Hearing: \_\_\_\_\_ Action taken: \_\_\_\_\_

City Council Hearing: \_\_\_\_\_ Action taken: \_\_\_\_\_