



For Office Use

(3) hard copies and an electronic copy submitted _____
\$200.00 Application Fee _____

CITY OF BATH APPLICATION for CONTRACT REZONING

Property address: _____

Property owner's name: _____

Property owner's address: _____

Applicant's name _____

Applicant's address _____
(if different than owner)

Applicant's email _____

Interest in property: _____
(must be owner, option holder, lessee, etc.)

Size of property: _____ Portion developed at this time: _____

Present Zoning of parcel: _____ Map: _____ Lot: _____

Attach a statement explaining how this request complies with the Mandatory Conditions contained in Land Use Code Section 15.2, D, 1.

Attach a list of the discretionary conditions being proposed according to Land Use Code Section 15.2, D, 2

Procedures and requirements for Contract Rezoning are contained in Section 15.2 of the City's Land Use Code, which is available in the City Clerk's Office.

The Planning Board meets to review projects the first Tuesday of each month. For a project to be scheduled for review, we must have the complete application in the Planning Office **four weeks** prior to the date of the meeting. The Planning Board will make a recommendation to the City Council, which will take final action.

Applicant signature: _____

Telephone number: _____ Date: _____