

City of Sidney



Montana's Sunrise City

APPLICATION TO AMEND THE ZONING CODE WITHIN THE CITY OF SIDNEY

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

Name of Applicant: _____

Address of Applicant: _____

Phone Number 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 if for the following reason: _____

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

1. Text to be changed is found in Section: _____ Page: _____
2. Change text to read: _____

(use additional pages if necessary)

3. Explain the 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" x 17" 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 a **\$300 filing fee. The application will not be considered complete until all information is submitted.**

Applicant Signature

For Office Use Only

Date Filed:	_____	Filing Fee:	_____
Zoning Commission	_____	Action Taken:	_____
Public Hearing:	_____	Action Taken:	_____
City Council Hearing:	_____	Action Taken:	_____