



CITY OF GREAT BEND
PLANNING COMMISSION
REZONING APPLICATION

DATE: _____

APPLICATION FEE: \$250.00

APPLICANT NAME: _____

APPLICANT ADDRESS: _____

APPLICANT PHONE: _____

PROPERTY OWNER DIFFERS FROM APPLICANT

PROPERTY OWNER NAME: _____

PROPERTY OWNER ADDRESS: _____

PROPERTY OWNER PHONE: _____

PROPERTY TO BE REZONED IS LOCATED IN THE: [] CITY [] COUNTY

ADDRESS OF PROPERTY TO BE REZONED: _____

CURRENT ZONING DESIGNATION: _____

REQUESTED ZONING CHANGE TO: _____

WHY IS A ZONING DESIGNATION CHANGE BEING REQUESTED? _____

APPLICATION CHECKLIST:

- APPLICATON FEE
COPY OF LEGAL DESCRIPTION
COPY OF LEASE AGREEMENT (if applicable)
CERTIFIED PROPERTY OWNER LIST: Certified property owner list must be obtained by a licensed abstractor. The list shall contain the names and addresses of all owners of real property within a two hundred (200) foot radius of the above-described property within City of Great Bend limits and a one thousand (1,000) foot radius of the above-described property outside City of Great Bend limits. This ownership list is to contain a plat indicating the radius measurements.
SCALED PLOT PLAN OF THE PROPOSED DEVELOPMENT

I hereby certify that statements contained in this application are true and correct.

Signature of Property Owner

Printed Name of Property Owner

Signature of Applicant

Printed Name of Applicant

*Complete applications will be set for the next regularly scheduled Planning Commission meeting that accommodates meeting all publication and mailing requirements. Following the Planning Commission decision, the application will be forwarded to the City of Great Bend City Council. Fourteen (14) days are required from Planning Commission decision to a hearing by the Great Bend City Council for approval or denial of the request. If no report is made to the City of Great Bend City Council from the regularly scheduled Planning Commission meeting, it shall be assumed that the Planning Commission has given approval of the application.

Protests may be filed with the City Clerk, City of Great Bend, within fourteen (14) days after the date of the City Council meeting in which the hearing is concluded. Protests may be filed whether approved or disapproved and must be signed by twenty (20) percent or more of the affected property owners. If a valid protest is filed, the proposed zone changes shall not be approved except by at least two-thirds (2/3) vote of all members of the City of Great Bend City Council.

City Use Only	
Date Application Received: _____	Scheduled Hearing Date: _____
Notice Published On: _____ <i>(minimum of 20 days prior to hearing)</i>	Notice Mailed On: _____ <i>(minimum of 20 days prior to hearing)</i>
Planning Commission Action	
<input type="checkbox"/> APPROVE	<input type="checkbox"/> DENY
for the following reasons: _____ _____	
Date: _____	By: _____ Chairman
City Council Action	
Meeting Date: _____	Action Passed: _____

Remit Application to: City of Great Bend, c/o Building Inspections, 1205 Williams, Great Bend, KS 67530
Phone: 620-793-4106