



**CITY OF FRANKFORT  
 PLANNING & BUILDING CODES  
 DEPARTMENT  
 P.O. Box 697  
 Frankfort, Kentucky 40602  
 Phone: (502) 352-2094 Fax: (502) 875-3579  
 www.frankfort-ky.gov**

OFFICE USE ONLY  
 Received: \_\_\_\_\\_\_\_\_\\_\_\_\_  
 Payment Amt: \$\_\_\_\_\_  
 REZ No.:\_\_\_\_\_  
 Meeting:\_\_\_\_\_

**APPLICATION FOR ZONE MAP AMENDMENT**

**Tentative Meeting Date:**\_\_\_\_\_ **Filing Deadline:**\_\_\_\_\_

The Undersigned owner(s) of the following described property hereby request the consideration of change in zone district classification as specified below:

1) **GENERAL INFORMATION**

- a) Property Owner (The owner must be the applicant): \_\_\_\_\_
- b) Mailing Address: \_\_\_\_\_
- c) Daytime Phone: \_\_\_\_\_
- d) Fax:\_\_\_\_\_ Email:\_\_\_\_\_

2) **SITE INFORMATION**

- a) General Location of Property:\_\_\_\_\_
- b) Subdivision Name: \_\_\_\_\_
- c) Street Address: \_\_\_\_\_

3) **ZONING INFORMATION**

- a) Present Zoning of Property: \_\_\_\_\_
- b) Proposed Zoning of Property: \_\_\_\_\_
- c) Existing Use of Property: \_\_\_\_\_
- d) Proposed Use of Property: \_\_\_\_\_
- e) Size of Property: \_\_\_\_\_Acres or \_\_\_\_\_Square Ft.

4) **SUPPORTING INFORMATION**

The following items must be attached to the application as supporting information to this request:

- a) A vicinity map showing the location of the request.
- b) A list of all property owners and their mailing addresses within, contiguous to, and directly across the street from the proposed rezoning.
- c) Legal description of the property. If proposed change involves only a portion of a parcel the applicant must attach a survey conducted by a registered land surveyor.
- d) Statement of Fact that the proposed change meets the minimum requirements of KRS 100.213.
- e) Conceptual Development Plan or Preliminary Subdivision Plat, as required in Articles 5 and 8 of the City of Frankfort's Zoning Ordinance or the Subdivision Regulations.
- f) Filing Fee of \$300. Make checks payable to the Frankfort/Franklin County Planning Commission.

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Signature of Property Owner(s)

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Date:

**NOTE: One (1) copy of this form and the Supporting Information, Items A through F, must be filed with the Frankfort/Franklin County Planning Commission at the City of Frankfort, Department of Planning and Building Codes by the deadline date.**