

Howard County Plan Commission Petition for a Change in Zone Classification

For Office Use Only	Date Filed:	Case Number:
Receipt No.:	Paid: \$	Accepted By:

We, _____, owners of Real Estate within Howard County respectfully request that the Howard County Plan Commission consider and recommend to the Howard County Board of Commissioners, after due notice has been given to affected persons and a legally-advertised public hearing has been conducted, to change the zone classification from _____ to _____, for property located at (Address):

We submit that the requested change on the Zone Map, being a part of the Howard County Zoning Ordinance, No. 2009 – BCCO - 21, as amended, is appropriate and justified for the following reasons:

1. We believe:

(A) That an error that was committed in the Howard County Comprehensive Plan as evidenced by:

_____;

OR

(B) That the community has changed in the immediate area since the adoption of the Howard County Comprehensive Plan as evidenced by: _____

(If neither (A) or (B) above can be established, the request will be declared unreasonable and called "Spot Zoning", that is the conferring of special rights or benefits on a relatively small tract without commensurate benefits to the community.

2. We believe that the Public Health, Safety, Comfort, Convenience, Morals, and General Welfare will be promoted by virtue of: _____

when this change is accomplished and any of the permitted uses completed.

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3. We finally believe that the proposed zone classification is particularly suited to this location since:

_____ and that surrounding
property values shall not be adversely affected by any of the uses permitted therein, because:

_____.

(If the spaces allotted are inadequate, attach supplementary page(s).)

Legal Description of Subject Property: _____

Owner's Signature(s): _____

(A copy of an option signed by the owners is acceptable.)

Owner:	Name:	
	Address	
	Telephone No.:	Fax No.:
	E-Mail:	

Agent:	Name:	
	Address	
	Telephone No.:	Fax No.:
	E-Mail:	

(PROPOSED USE OF PROPERTY: _____.)