

REZONE APPLICATION

Planning Office – 600 9th Street – Wheatland, Wyoming 82201
Office 307.322-2962 – Fax 307.322.2968



All applications must include the following:

- Application:** Fill out the application form completely. *Incomplete applications will be returned.*
- Fees:** All applicable fees. Check or Cash only, the planning office cannot process credit cards.
- Site Plan:** Complete site plan and/or plat (PDF preferred)
- Proof of Ownership:** Book and page number of the deed, copy of the deed, lease, or contract for purchase.
- Letter of Justification:** Statement of purpose and/or need for the rezone.
- Parcel Boundary Map:** Map showing the surrounding area and boundary of the parcel of the proposed rezone area.

Applicant Name: _____ Phone No.: _____

Mailing Address: _____

E-mail Address: _____

If the applicant is other than the owner of the property for which this rezone is being sought, the applicant must provide separate written approval from the owner, or the owner may indicate approval by signing below.

Owner Name: _____ Signature.: _____

Mailing Address: _____

E-mail Address: _____ Phone No.: _____

Proof of Ownership: Deed Book _____ Page _____, Deed, Lease, Purchase Contract Attached

Legal description of property for which this rezone is being requested:

Subdivision: _____ Tract/Lot(s): _____ Quarter Section: _____

Of Section: _____ Township _____ North, Range _____ West

Legal description can be found on the property deed.

Located within the Wheatland Irrigation District Boundaries: Yes No

If yes, attach the corresponding approved Wheatland Irrigation District Water Plan for Subdividers.

Current Land Use: _____ Current Zoning Class: _____

Proposed Land Use: _____ Requested Zoning Class: _____

R- _____ - _____

SITE PLAN REQUIREMENTS

- ❖ Show the entire lot or parcel with dimensions and orient the drawing with the North Arrow.
- ❖ Indicate adjacent roads and their names.
- ❖ Indicate locations and outside dimensions of all buildings.
- ❖ Setbacks are required for buildings and/or project structures. Indicate setbacks from property lines, easements, rights-of-way, and roads for all proposed structures and provide the distances.
- ❖ Setbacks are required for both the well and wastewater (septic) system. Indicate setbacks from property lines with distances to well and wastewater system.
- ❖ Indicate other significant features or improvements of the subject property, such as streams, ponds, irrigation ditches, wells, floodplains, wastewater systems, corrals, fences, towers, overhead power lines, etc.
- ❖ Commercial, Industrial, and Multi-Family parcels must identify landscaping and parking areas.
- ❖ Indicate the driveway location(s).

PARCEL BOUNDARY MAP REQUIREMENTS

- ❖ Map showing a half-mile radius around the parcel to be rezoned, oriented with the North Arrow.
- ❖ The parcel requested to be rezoned shall be highlighted on the map.

APPLICATION SIGNATURE(S) AND ACCESS PERMISSION

Right to ingress property for assessment, evaluation, and inspections.

I, the undersigned, hereby grant authorized Platte County Personnel the right to enter onto this said land/property for all inspection, assessment, and/or evaluation purposes necessary to process this Rezone application. I certify, to the best of my knowledge, that all the information in this application is true and correct, and that I am the owner of the above-described property or have been authorized by the owner to make this application as his/her agent.

Signature of Applicant(s)

Date

PLANNING OFFICE USE ONLY

Date completed application received: _____ Application Fee Total: _____

Planning & Zoning Commission Public Hearing Date: _____ Approved Disapproval

Board of County Commissioners Public Hearing Date: _____ Approved Disapproval

This Rezone request is granted with/ without conditions; this ____ day of _____, 2021.

County Commissioner Chairman

Rezone Conditions: _____

