



City of Freeport, IL

Zoning Map Amendment Application

\$100 filing fee due at application submittal

Applicant Name: _____

Phone Number: _____ Email: _____

Property Address: _____

PIN #: _____

Legal Description of Property:

Current Zoning District: _____ Proposed Zoning District: _____

Existing Use of Property [What structures are on the property, and/or what activities are currently performed there?]:

Proposed Use of Property [What are the proposed changes at the property regarding additional structures and/or activities?]:

Please address the following items (attach additional sheets as necessary):

How does the amendment relate to the existing uses and zoning of nearby property? [How similar is the structures and/or activities you are proposing compared to those of nearby properties in the neighborhood?]

Will the amendment diminish property values of nearby parcels, why or why not? If yes, to which extent? [Will the proposed structures and/or activities lower the property values of nearby land?]

Will the amendment impose a relative hardship on adjacent or nearby property owners by reason of the proposed use, why or why not? [Will the proposed structures and/or activities negatively impact nearby property owners by way of visual, noise, noxious or other similar disturbance?]

How well suited is the subject property for the proposed purpose? [How does the proposed structures and/or activities relate to the size, location, physical characteristics, etc. of the property?]

If the property is vacant: How long has it been vacant as zoned, considering the context of land development in the vicinity of the subject property? [If the property has been vacant, how long has it been vacant compared to nearby properties?]

What is the community's need for the proposed use? [Why does the neighborhood need the proposed structure and/or activities?]

How does the amendment relate to the City of Freeport's Comprehensive Plan? [How do the proposed structures and/or activities relate to contents of the City's most recent Comprehensive Plan {A copy of the Comprehensive Plan is available at City Hall, or online on the City's website}].

Signature: _____

Date: _____

For Office Use Only

Date Received: _____

Zoning Board of Appeals Meeting Date: _____

Planning Commission Meeting Date: _____

City Council Meeting Date: _____

Ordinance Number: _____



CITY OF FREEPORT, ILLINOIS
DEPARTMENT OF COMMUNITY AND ECONOMIC DEVELOPMENT
 City Hall Building • 314 West Stephenson Street • Freeport, IL 61032
 Telephone (815) 235-8202 • Fax (815) 599-5819

ATTACHMENT B

LETTER OF AUTHORIZATION

DATE: _____

TO: The City of Freeport

This letter authorizes _____

to prepare and submit an application for an amendment of zoning classification for _____

being lot # _____, block # _____, PIN # _____

Subdivision _____

for processing.

Signature

Signature

Printed Name of Owner

Printed Name of Owner

Address

Address

City, State & Zip Code

City, State & Zip Code

STATE OF ILLINOIS)

) **ss.**

STEPHENSON COUNTY)

BEFORE ME, a Notary Public in and for said County and State, the undersigned authority, on this day personally appeared _____ known to me to be the person whose signature is subscribed to the foregoing instrument.

GIVEN UNDER MY HAND AND SEAL this _____ day of _____, _____.

SEAL

Notary Public
My commission expires: _____



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ATTACHMENT C

NOTICE

TO _____

On _____, _____, an application for (applicant name) _____ was filed in the Department of Community Development in the City Hall Building, Freeport, Illinois. All of the said documents may be examined during business hours in the Community Development Office, 314 West Stephenson Street, Freeport, IL 61032.

A Public Hearing will be held by the City of Freeport Zoning Board of Appeals in the City Council Chambers, City Hall, 314 West Stephenson Street, Freeport, Illinois, on the said documents on _____, _____ at _____ p.m.

The real estate that is the subject matter of the pending action is described as follows:

ADDRESS: _____

LEGAL DESCRIPTION: _____

The relief sought by the documents on file is a change in zoning classification from _____ to _____.

DATED: _____, _____.



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ATTACHMENT D

AFFADAVIT OF MAILING NOTICE

STATE OF ILLINOIS)
)
 STEPHENSON COUNTY) ss.

The undersigned, being first duly sworn on his oath deposes and says that on _____, _____, he/she mailed a notice, a true and complete copy of which is attached hereto and made a part hereof, to each of the following named person(s), fully and completely addressed, with postage prepaid, to the address shown, by registered or certified mail with return receipt requested, and return receipts for said mailings are attached hereto.

PROPERTY
 IDENTIFICATION
 NUMBER

NAME

ADDRESS

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

 Signature of Affiant

SUBSCRIBED and sworn to before me this _____ day of _____, _____.

 Notary Public