



**REZONING APPLICATION**  
**City of Opelika**  
**Opelika Planning Department**  
**700 Fox Trail, Opelika, AL 36801**  
**(334) 705-5156, Fax (334) 705-5159**



**For Office Use**

<b>Date Submitted:</b>	<b>Meeting Deadline:</b>
<b>Case Number:</b>	<b>Planning Commission Meeting:</b>

**PART I. OWNER/APPLICANT INFORMATION**

<i>Owner Name</i>	<i>Address</i>	<i>Phone</i>
<i>Agent Name (if applicable)</i>	<i>Address</i>	<i>Phone</i>

**PART II. PARCEL(S) INFORMATION**

Street Address \_\_\_\_\_

Lee County Tax Identification Number: \_\_\_\_\_

Current Zoning: \_\_\_\_\_

Current Land Use: \_\_\_\_\_

<b>For Office Use:</b>	
Number of Adjacent Property Owners: .....	<u>. X \$5.32 =</u>
List names and addresses of all adjacent property owners	<u>+ Fee = \$125</u>
on back of application & provide a map of the rezoning property.	<b>TOTAL = \$</b> _____

**SIGN PLANNING COMMISSION CHARGE FORM**

**PART III. PROPOSED ZONING AND USE**

**Description of the Proposed Use:**

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**PART IV.**

I hereby request my property located at (street address) \_\_\_\_\_, Lee County Tax Map parcel # \_\_\_\_\_ be rezoned from \_\_\_\_\_ to \_\_\_\_\_. A copy of the tax area map, a survey of the property, a copy of the deed for the property, and the names and addresses of all adjoining property owners are enclosed. I understand that the City may require additional information, or waive certain requirements, at any time during the process.

Signature	Date
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# PETITION FOR REZONING

TO: THE CITY COUNCIL OF THE CITY OF OPELIKA, ALABAMA:

Come now the undersigned (hereinafter referred to as the "Petitioners"), represent and show unto your Honors as follows:

1. The Petitioners are the majority of the property owners, owning the majority of property hereinafter described, as follows:

SEE EXHIBIT "A" ATTACHED HERETO AND INCORPORATED  
HEREIN BY REFERENCE

2. There is attached hereto as Exhibit "B" and made a part of this Petition, a map of the above-described territory which is proposed to be rezoned.

Come now the petitioners respectfully ask the City Council of the City of Opelika to amend its Zoning Ordinance to change the zoning designation of the area described from a

\_\_\_\_\_ zoning district to a \_\_\_\_\_ zoning district.



**NOTARY SIGNATURES**

Before me, \_\_\_\_\_, a Notary Public in and for said County and State, hereby certify that \_\_\_\_\_, whose name is signed to the foregoing petition as \_\_\_\_\_ [President, Chairman, etc.] of \_\_\_\_\_ [Corporation, City], and who is known to me, acknowledged before me on this date that he executed the same voluntarily for and as the act of said corporation, being duly authorized to do so, all on the day they say bears date. Given under my hand and official seal of office this the \_\_\_\_\_ day of \_\_\_\_\_, 2000.

\_\_\_\_\_ Notary Public

I, the undersigned authority, a Notary Public in and for said County and State, hereby certify that \_\_\_\_\_, whose name is signed to the foregoing petition, and who is known to me, acknowledged before me on this day, that being informed of the contents of said petition, he/she executed the same voluntarily on this date. Given under my hand and official seal of office this day of \_\_\_\_\_, 20\_\_.

\_\_\_\_\_ Notary Public

I, the undersigned authority, a Notary Public in and for said County and State, hereby certify that \_\_\_\_\_, whose name is signed to the foregoing petition, and who is known to me, acknowledged before me on this day, that being informed of the contents of said petition, he/she executed the same voluntarily on this date. Given under my hand and official seal of office this day of \_\_\_\_\_, 20\_\_.

\_\_\_\_\_ Notary Public

\_\_\_\_\_ (print name)

\_\_\_\_\_ (address)

\_\_\_\_\_ (city)

BY: \_\_\_\_\_ (signature)

ITS: \_\_\_\_\_ (title)

DATE: \_\_\_\_\_

\_\_\_\_\_ (Signature)

\_\_\_\_\_ (print name)

\_\_\_\_\_ (mailing address)

DATE: \_\_\_\_\_

\_\_\_\_\_ (Signature)

\_\_\_\_\_ (print name)

\_\_\_\_\_ (mailing address)

DATE: \_\_\_\_\_



I, the undersigned authority, a Notary Public in and for said County and State, hereby certify that \_\_\_\_\_, whose name is signed to the foregoing petition, and who is known to me, acknowledged before me on this day, that being informed of the contents of said petition, he/she executed the same voluntarily on this date. Given under my hand and official seal of office this day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_ Notary Public

\_\_\_\_\_  
 (Signature)  
 \_\_\_\_\_  
 (print name)  
 \_\_\_\_\_  
 \_\_\_\_\_  
 (mailing address)  
 DATE: \_\_\_\_\_

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\_\_\_\_\_ Notary Public

\_\_\_\_\_  
 (Signature)  
 \_\_\_\_\_  
 (print name)  
 \_\_\_\_\_  
 \_\_\_\_\_  
 (mailing address)  
 DATE: \_\_\_\_\_

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\_\_\_\_\_ Notary Public

\_\_\_\_\_  
 (Signature)  
 \_\_\_\_\_  
 (print name)  
 \_\_\_\_\_  
 \_\_\_\_\_  
 (mailing address)  
 DATE: \_\_\_\_\_