

Pender County Planning and Community Development

805 S. Walker Street
PO Box 1519
Burgaw, NC 28425



Phone: 910-259-1202
Fax: 910-259-1295
www.pendercountync.gov

Zoning Map Amendment Submission (Rezoning)

Applications will be considered for review by Staff only when deemed complete. The application will be regarded as incomplete until the following items are received by the Planning and Community Development Staff.

1. _____ **Pre-submittal Meeting**
Date of Meeting _____
2. _____ **Signed Application**
3. _____ **Payment**
\$500 for the first 5 acres; \$10/ acre thereafter up to 1,000 acres; \$5 per acre thereafter
4. _____ **Requested Revision Boundary Map**
Rezoning must correspond with the boundary lines of existing platted lots or tracts. Where the boundaries of a rezoning request do not follow a boundary line or a split zoned property line, it must be possible to subdivide and develop that portion of the property outside the proposed rezoning boundary in accordance with the existing zoning and other requirements of this Ordinance. An illustration containing a metes and bounds description is required.
4. _____ **Narrative**
A description and/or statement of the present and proposed land use classification and stating why the request is being made and any information that is pertinent to the case.
5. _____ **Digital Submission**
For all documents submitted in paper copy, bring a digital copy with paper submission.
6. _____ **Adjacent Property List**
A list of names and addresses, of the owners of all properties located within 500-feet of the perimeter of the project bounds as obtained from the county tax listings and tax abstract, of the property under consideration for project parcel.
7. _____ **Adjacent Property Envelopes**
The applicant shall provide a set of business envelopes addressed to each person of the owners of all the properties located within 500-feet of the perimeter of the project bounds, accompanied with the amount of postage required for first class postage.

I certify that all information presented in this application is accurate to the best of my knowledge.

Signature of Applicant _____

Date _____

Printed Name _____

Staff Initials: _____

Date: _____

Zoning Map Amendment



**Submit Completed Application
and Materials**



Planning Staff Review



**Planning Staff comments
addressed**



Planning Board Public Hearing



**Board of County Commissioners Public
Hearing**



Decision Rendered by Board

		Agenda Deadline	PB Meeting Date	BOC Meeting Date
Planning Board and Board of Commissioners	January	11.18.16	1.4.17 (Wed)	2.21.17
	February	12.22.16	2.7.17	3.20.17
	March	1.20.17	3.7.17	4.18.17
	April	2.17.17	4.4.17	5.15.17
	May	3.17.17	5.2.17	6.19.17
	June	4.21.17	6.6.17	7.3.17
	July	5.19.17	7.5.17 (Wed)	8.21.17
	August	6.16.17	8.1.17	9.18.17
	September	7.21.17	9.6.17 (Wed)	10.16.17
	October	8.18.17	10.3.17	11.20.17
	November	9.22.17	11.7.17	12.4.17
	December	10.20.17	12.5.17	

Complete Application Date: All documents must be received by 12PM on the deadline date to be considered a complete application.

Zoning Map Amendment Specific Requirements

1. Application Submittal

- Application
- Rezoning must correspond with the boundary lines of existing platted lots or tracts. Where the boundaries of a rezoning request do not follow a boundary line or a split zoned property line, it must be possible to subdivide and develop that portion of the property outside the proposed rezoning boundary in accordance with the existing zoning and other requirements of this Ordinance. An illustration containing a metes and bounds description is required.
- All zoning requirements shall be met within the boundaries of the area being rezoned. If all of the requirements cannot be met on the site being rezoned, the rezoning shall be expanded to include all property necessary to meet zoning requirements.
- Must show substantial compliance with the goals and policies of the Comprehensive Land Use Plan.
- The rezoning application must contain a description and/or statement of the present and proposed zoning regulation or district boundary, and the name(s) and address(es) of the owner(s) of the property involved as required by General Statute.
- The applicant shall provide an accurate legal description or a map drawn to scale showing the property boundaries that are to be rezoned, in sufficient detail for the rezoning to be located on the Official Zoning Map.

2. Planning Board and Board of Commissioners Review Criteria (per Section 3.3.8)

- A. Whether the range of uses permitted by the proposed change would be appropriate to the area concerned (including not being detrimental to the natural environment, not adversely affecting the health or safety of residents or workers in the area, not being detrimental to the use or development of adjacent property, and not materially or adversely affecting the character of the general neighborhood);
- B. Whether adequate public facilities/services (i.e., water, wastewater, roads) exist, are planned, or can be reasonably provided to serve the needs of any permitted uses likely to be constructed as a result of such change;
- C. Whether the proposed change is consistent with the County's Comprehensive Land Use Plan and CAMA Land Use Plan or any other adopted land use document.
- D. Whether the proposed amendment is reasonable as it relates to the public interest.

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GENERAL USE REZONING

GENERAL

1. An applicant shall be required to schedule a pre-submittal meeting with the Administrator at least thirty (30) days prior to submission of an application.
2. Amendments to the Zoning Map, also called a Rezoning, shall be made in accordance with the provisions of the Pender County UDO and shall follow the review process as shown in Figure 1 at the end of Section 3.4.
3. The County Commissioners shall approve or deny amendments to the Zoning Map of Pender County, as may be required from time to time.
4. Rezoning must correspond with the boundary lines of existing platted lots or tracts. Where the boundaries of a rezoning request do not follow a boundary line or a split zoned property line, it must be possible to subdivide and develop that portion of the property outside the proposed rezoning boundary in accordance with the existing zoning and other requirements of the UDO. An illustration containing a metes and bounds description is required.
5. All zoning requirements shall be met within the boundaries of the area being rezoned. If all of the requirements cannot be met on the site being rezoned, the rezoning shall be expanded to include all property necessary to meet zoning requirements.
6. Must show substantial compliance with the goals and policies of the Comprehensive Land Use Plan and other adopted plans.

APPROVAL STANDARDS

1. Whether the range of uses permitted by the proposed change would be appropriate to the area concerned (including not being detrimental to the natural environment, not adversely affecting the health or safety of residents or workers in the area, not being detrimental to the use or development of adjacent property, and not materially or adversely affecting the character of the general neighborhood).
2. Whether adequate public facilities/services (i.e., water, wastewater, roads) exist, are planned, or can be reasonably provided to serve the needs of any permitted uses likely to be constructed as a result of such change.
3. Whether the proposed change is consistent with the County's Comprehensive Land Use Plan and CAMA Land Use Plan or any other adopted land use document.
4. Whether the proposed amendment is reasonable as it relates to the public interest.

APPLICATION FOR REZONING (Zoning Map Amendment)

THIS SECTION FOR OFFICE USE			
Application No.	ZMA	Date	
Application Fee	\$	Receipt No.	
Pre-Application Conference		Hearing Date	
SECTION 1: APPLICANT INFORMATION			
Applicant's Name:		Owner's Name:	
Applicant's Address:		Owner's Address:	
City, State, & Zip		City, State, & Zip	
Phone Number:		Phone Number:	
Email Address:		Email Address:	
Legal relationship of applicant to land owner:			
SECTION 2: PROJECT INFORMATION			
Property Identification Number (PIN):		Total property acreage:	
Current Zoning District:		Proposed Zoning District:	
Project Address :			
Description of Project Location:			
SECTION 3: SIGNATURES			
Applicant's Signature		Date:	
Owner's Signature		Date:	
<u>NOTICE TO APPLICANT</u>			
<ol style="list-style-type: none"> 1. Applicant must also submit the information described on the Rezoning Checklist. 2. Applicant or agent authorized in writing must attend the public hearing. 3. Once the public hearing has been advertised, the case will be heard unless the applicant withdraws the application or unless the Planning Board or other authorized person agrees to table or delay the hearing. 4. All fees are non-refundable 5. A complete application packet must be submitted prior to the deadline in order to be placed on the next Planning Board Agenda 			

Rezoning/Zoning Map Amendment Checklist

<input type="checkbox"/>	Signed application form						
<input type="checkbox"/>	Application fee						
<input type="checkbox"/>	A list of names and addresses, as obtained from the county tax listings and tax abstract, all adjacent property owners, including property owners directly across any road or road easement, and owners of the property under consideration for rezoning.						
<input type="checkbox"/>	Two (2) business size envelopes legibly addressed with first class postage for each of the adjacent and abutting property owners on the above list.						
<input type="checkbox"/>	Accurate legal description or a map drawn to scale showing the property boundaries to be rezoned, in sufficient detail to for the rezoning to be located on the Official Zoning Map.						
<input type="checkbox"/>	18 (11"x17") map copies to be distributed to the Planning Board						
<input type="checkbox"/>	20 (11"x17") map copies to be distributed to the Board of Commissioners						
<input type="checkbox"/>	Digital (.pdf) submission of all application materials						
<input type="checkbox"/>	A description and/or statement of the present and proposed zoning regulation or district boundary and stating why the request is being made and any information that is pertinent to the case. If the owner and applicant are different, the letter must be signed by both parties.						
Office Use Only							
<input type="checkbox"/>	ZMA Fees: (<i>\$500.00 for first 5 acres; \$10/acre thereafter up to 1,000 acres; \$5/acre thereafter</i>)				Total Fee Calculation: \$		
Attachments Included with Application: (Please include # of copies)							
CD /other digital version	<input type="checkbox"/> Y <input type="checkbox"/> N	Plan Sets	# of large	# of 11X17	Other documents/Reports	<input type="checkbox"/> Y <input type="checkbox"/> N	
Payment Method:	Cash : <input type="checkbox"/> \$ _____			Credit Card: <input type="checkbox"/> Master Card <input type="checkbox"/> Visa		Check: <input type="checkbox"/> Check # _____	
Application received by:					Date:		
Application completeness approved by:					Date:		
Dates scheduled for public hearing: <input type="checkbox"/> Planning Board: <input type="checkbox"/> Board of Commissioners:							

RETURN COMPLETED APPLICATION TO:
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805 South Walker Street
P.O. Box 1519
Burgaw, NC 28425