



**BLACK HAWK COUNTY PLANNING AND ZONING COMMISSION  
REQUEST FOR REZONE**

**APPLICATION INFORMATION:**

Applicant's Name (please print): \_\_\_\_\_  
Address: \_\_\_\_\_ Phone: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Email: \_\_\_\_\_  
Status of Applicant: (a) Owner\_\_\_\_ (b) Other\_\_\_\_ (CHECK ONE) If other explain:  
\_\_\_\_\_

Property Owner's Name if different than above (please print): \_\_\_\_\_  
Address: \_\_\_\_\_ Phone: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**PROPERTY INFORMATION:**

Legal Description of Area to be Rezoned: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

General Location of Property: \_\_\_\_\_

Dimensions of Proposed Zoning Boundary (Excluding Right of Way): \_\_\_\_\_  
Area of Proposed Zoning Boundary (Excluding Right of Way): \_\_\_\_\_  
Current Zoning District: \_\_\_\_\_ Requested Zoning District: \_\_\_\_\_  
The land will be utilized for: \_\_\_\_\_

The natural character of the land will be disrupted in the following ways: \_\_\_\_\_

The following methods will be utilized to minimize the nature disruption: \_\_\_\_\_

Other pertinent information (Use reverse side if necessary): \_\_\_\_\_

Conditions (if any) agreed to: \_\_\_\_\_

**Please Note:** If it is the intent to subdivide (split) any land, vacant or improved in conjunction with this request it **must** also go through a platting process (separate from rezone request). The Request Fee of **\$200 + \$10 per acre (\$750 max)** (payable by check to Black Hawk County) is required (round amount down to nearest \$10 increment). *Black Hawk County will never request electronic payment.* The undersigned certify under oath and under the penalties of perjury that all information on this request and submitted along with it is true and correct. All information submitted will be used by the Black Hawk County Planning and Zoning Commission and the Board of Supervisors in making their decision. Any major change in any of the information given will require that the request goes back through the process, with a new Request Fee. The undersigned authorizes County Zoning Officials to enter the property in question in regard to the request.

\_\_\_\_\_  
Signature of Applicant                      Date

\_\_\_\_\_  
Signature of Owner    Date