

D) Review Fee Attached:

1. Zone Change: \$1,450

E) Site Information

Current Property Use	
FIRM Zone & Panel No.	
Wetlands	
Comprehensive Plan Special Treatment Zones:	
Surrounding Land Uses North:	
South:	
East:	
West:	

F) Utilities

Applicants must provide information as to how the site will have access to potable water, sewage disposal, solid waste disposal, roads, and stormwater control.

1. Water and Sewer Service:

a. Potable Water Service Provider

Municipal (please note municipality providing service): _____

Private Well (if no municipal provider, check box): _____

b. Sanitary Sewer Service/Wastewater Treatment Provider

Municipal (please note municipality providing service): _____

Onsite Septic System (if no municipal provider, check box): _____

2. Stormwater: Describe how stormwater will be controlled and treated:

3. In which evacuation zone(s) is the subject property located: (Evacuation zone map located at <https://www.baycountyfl.gov/275/Map-Gallery>)

_____ A Zone _____ B Zone _____ C Zone

_____ D Zone _____ N/A

G) Project Information/Justification

Provide a detailed description of the purpose of the proposed zone change, and how the proposed change is consistent with the following Findings Guidelines (Section 307.3).

- a. The application for zone change is consistent with the Comprehensive Plan. To be consistent means: that the zone change is within the proper land use category shown on the Comprehensive Plan Future Land Use Map and complies with all standards and criteria associated with that category, and; the application for zone change is not inconsistent or in conflict with the Comprehensive Plan, Policy 3.2.1 of the Future Land Use Element as follows.
 - i. Potential for threat to the health, safety, and welfare of the general public;
 - ii. Potential to create public nuisance(s);
 - iii. Site suitability;
 - iv. Compatibility between zones;
 - v. Consistency with the Comprehensive Plan;
 - vi. Availability of infra-structure facilities and services;
 - vii. Would not create "spot" zoning, and;
 - viii. Criteria specified in Table 3A of the Comprehensive Plan.

I) Certification and Authorization

- (1) By my signature, I certify that the information contained in this application is true and correct and understand that deliberate misrepresentation of such information will be grounds for denial and reversal of this application and or revocation of any approval based on this application.
- (2) I authorize County staff to enter upon my property at any reasonable time for the purpose of site inspection.
- (3) I authorize the placement of a public notice sign on my property at a location to be determined by County staff.
- (4) I _____ (print name) as the property owner or authorized property owner representative have read and understand the attached information concerning Application for Amendment to the Bay County Zoning Map.

Applicant Name (Type or Print)

Applicant Signature

Title and Company (if Applicable)

Date

ZONING MAP AMENDMENT APPLICATION COMPLETENESS CHECKLIST

Planning and Zoning Staff will only accept complete applications.

Requirements	Check if Complete
Complete Application Form	
\$1,450.00 Fee	
Letter of Authorization (If Necessary)	
Signed Deed to Property (8.5 X 11 copy)	
Survey/Map of Property (8.5 X 11 copy)	

Be aware of internet scams. These application fees are due at the time of submittal. County staff will not request any further application fees by email once these fees are received. Please alert staff if you receive additional request for application fees (850-248-8250).