



THOMASVILLE PLANNING AND ZONING COMMISSION
APPLICATION FOR TEXT AMENDMENT

<u>Office Use Only</u>	
Case Number: _____	Date Filed: _____
Zoning District: _____	Notice of Hearing: _____
Map/Block/Lot Number: _____	Publish Date: _____

***Application is Due the 1st Monday for the following months meeting**

To the Planning Commission and the City Council:

I (we), the undersigned, do hereby respectfully make application and petition the City Council to amend the Zoning Code of the City of Thomasville as hereinafter requested, and in support of this application.

REQUIRED INFORMATION:

Has an application previously been submitted regarding a similar text amendment?

Yes ____ No ____ If yes, please provide the application number(s): _____

Identify the text to be amended or repealed, including the Article and Section number (attach additional sheets).

What text is proposed, if any (attach additional sheets)?

State the reason(s) for the Text Amendment information.

- It will implement the Comprehensive Plan or an amendment to the Comprehensive Plan.
- The ordinance's provisions were inconsistent or unreasonable in light of standards for similar uses.
- It provides additional flexibility in meeting the ordinance's objectives without lowering its standards.
- It addresses a new development standard, use, or changing condition.
- It clarifies existing language in the ordinance, including adjustments that account for interpretation.
- It is necessary to respond to state and / or federal legislation.

For each item selected above, please provide specific (supporting) information (attach additional sheets).

SUBMITTAL FEE: A non-refundable filing fee of \$500.00 payable to the "City of Thomasville."

Date Telephone Number (s) E-mail Address

Mailing Address Signature of the Applicant