

Rezoning Application

City of Kenai
Planning and Zoning Department
210 Fidalgo Avenue
Kenai, AK 99611
(907) 283-8200
planning@kenai.city
www.kenai.city/planning

PETITIONER					
Name:					
Mailing Address:		City:	State:	Zip Code:	
Phone Number(s):					
Email:					
PROPERTY INFORMATION					
Kenai Peninsula Boro	ough Parcel # (s):				
Physical Address:					
Legal Description:					
		ZONING INFORMATION	1		
Present Zone:					
Proposed Zone:					
Intended Use and/or Reason for Rezoning (attach additional sheets if necessary):					
AMENDMENT PROCEDURE REQUIREMENTS					
The area proposed to be rezoned contains a minimum of 1 acre (excluding street or alley rights-of-way), unless the amendment enlarges an adjacent zoning district boundary.					☐ YES
This proposed amendment to the zoning ordinance is not substantially the same as any other unapproved proposed amendment submitted within the previous 9 months.					☐ YES
I understand a public hearing is required as outlined in the Kenai Zoning Code, a \$250 fee is required (\$265 total after tax), and that this application will be reviewed following Kenai City Code 14.20.270, available at kenai.municipal.codes/KMC/14.20.270.					☐ YES
I have included a map of the proposed rezone area and applicable signatures.					☐ YES
The proposed Zoning		ng Map Amendments is i	nitiated by	(check one):	
☐ Kenai Planning & Zoning Commission					
Petition of majority of the property owners in the area to be rezoned					
Petition bearing the signatures of 50 registered voters within the City of Kenai					
\square Petition as provided by the Home Rule Charter of the City of Kenai					
	P	ETITIONER'S SIGNATU	RE		
Signature:					
Printed Name:				Date:	
For City Use Only Date Application Fee Received: PZ Resolution Number:					