



**City of Show Low Planning & Zoning**

180 N. 9<sup>th</sup> Street, Show Low, AZ 85901  
(928) 532-4040

**Zoning Ordinance & Map  
Amendment Petition Application**

**(Filing Fee: \$600.00)**

**For Office Use Only**

Date received: \_\_\_\_\_

Time received: \_\_\_\_\_ AM/PM

Received by: \_\_\_\_\_

**Owner Information**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

*Street Address*

*Apartment/Unit #*

*City*

*State*

*ZIP Code*

Phone: \_\_\_\_\_ Email \_\_\_\_\_

**Applicant Information (If different)**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

*Street Address*

*Apartment/Unit #*

*City*

*State*

*ZIP Code*

Phone: \_\_\_\_\_ Email \_\_\_\_\_

**Property Information**

Address of Property: \_\_\_\_\_

Legal Description of Property: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Parcel Number: \_\_\_\_\_ Current Zoning Classification: \_\_\_\_\_

What is the Nature of the Request? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## Application Requirements

To have a zoning ordinance or zoning map amendment processed, the applicant shall comply with each of the following requirements as deemed necessary by the Planning and Zoning Director:

- A pre-application meeting shall be arranged by the applicant with the Planning and Zoning Director to discuss any proposed amendment prior to the application submittal;
- A narrative of how the proposed amendment(s) is consistent with the Show Low General Plan and with the Development Plan Map of Show Low. Any contemplated uses shall be explained within the narrative, as well as outlining the neighboring land uses adjacent to the property;
- The pre- and post-zoning densities for the particular subject property shall also be calculated and included into the narrative;
- At least one reasonably detailed and legible map no smaller than eight and one-half (8 -1/2) inches by eleven (11) inches showing the particular property or properties that are being petitioned for a change and substantially the adjoining properties and the public streets within a radius of three hundred (300) feet from the external boundaries of the proposed zoning map amendment. Indicate the current ground cover, location of buildings and parking areas, the setback of the existing buildings and parking areas.
- A statement revealing any conditions or restrictions of record (if any) which would affect the permitted uses of the property if rezoned as requested and the date or dates (if any) of expiration thereof.
- Such conceptual plans, photographs, drawings, building elevations, and other supporting documents (if any) as the applicant may desire to present or deemed necessary by the Planning and Zoning Director.
- A neighborhood meeting, conducted solely by the applicant, shall be coordinated through the Planning and Zoning Director. A staff member will attend the meeting to observe and answer general questions only. Scheduling of the neighborhood meeting is a part of the application process and should be far enough in advance of the public hearing to allow staff and the applicant sufficient time to address possible concerns expressed at the meeting.**

## Authorized Representatives

**PLEASE NOTE:** In accordance with City Code, Title 19.10.100(2) (h) and (i), you or your authorized representative must be present at all Planning and Zoning and/or City Council hearings or public meetings regarding this application. Below please list any person(s) authorized to represent you during this application process. Representations made during those meetings or hearings and designated in the record shall be deemed conditions of approval.

---

---

---

---

## Certification

*I certify that the information on this application form and attachments are true and correct to the best of my knowledge. I realize that any incorrect information may lead to the cancellation of any proceedings and zoning ordinance and map amendment, if a zoning ordinance and map amendment has been issued.*

Signature of Owner(s): \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Owner(s): \_\_\_\_\_ Date: \_\_\_\_\_

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

**Waiver of Claims Under Arizona Revised Statutes § 12-1134**

I, \_\_\_\_\_, the owner of the property described as A.P.N. \_\_\_\_\_

Show Low, Arizona, hereby waive any and all claims for diminution in value to my property which may arise under A.R.S. § 12-1134 as a result of my request and application for a ZONE CHANGE. Further, I agree to defend, indemnify and hold harmless the City of Show Low, its officers, employees, and agents from and against any and all such claims for diminution in value to my property as defined in A.R.S. § 12-1134 arising out of my application or request for the applicable land use action as described above.

DATED this \_\_\_ day of \_\_\_\_\_, 20\_\_.

\_\_\_\_\_  
Signature of Property Owner

STATE OF ARIZONA        )  
  ) ss.  
County of \_\_\_\_\_)

SUBSCRIBED AND SWORN before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_,  
by \_\_\_\_\_.  
Name of Signer

\_\_\_\_\_  
Notary Public

[Notary Seal]