



**APPLICATION FOR REZONING**  
**CITY OF OPELIKA**  
**PLANNING DEPARTMENT**  
**700 FOX TRAIL OPELIKA, AL 36801**  
**P: (334) 705-5156 F: (334) 705-5159**

PC DEADLINE: \_\_\_\_\_ PC MEETING: \_\_\_\_\_

PROPERTY OWNERS/  
 AUTHORIZED REPRESENTATIVE: \_\_\_\_\_  
 MAILING ADDRESS: \_\_\_\_\_  
 PHONE NUMBER: \_\_\_\_\_ Email: \_\_\_\_\_

**PARCEL INFORMATION**

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

Description of proposed use: \_\_\_\_\_

Tax Parcel Number: \_\_\_\_\_

Adjacent Zoning Districts: North: \_\_\_\_\_ South: \_\_\_\_\_ East: \_\_\_\_\_ West: \_\_\_\_\_

Current Land Use: \_\_\_\_\_

Current Zoning: \_\_\_\_\_

Proposed Zoning: \_\_\_\_\_

Number of APO: \_\_\_\_\_ x \$6.74 = \$ \_\_\_\_\_  
 (Adjacent Property Owners)

Fee: \$125.00

**TOTAL** = \_\_\_\_\_

**PAID:** \_\_\_\_\_

I hereby request my property located at (street address) \_\_\_\_\_,  
 Tax Map parcel number \_\_\_\_\_ be rezoned from  
 \_\_\_\_\_ to \_\_\_\_\_. A copy of the tax area map, a survey of the property, a copy of the deed  
 for the property, and the names and addresses of all adjoining property owners are enclosed. I understand  
 that the City may require additional information, or waive certain requirements, at any time during the process.

OWNERS OR AUTHORIZED REPRESENTATIVE SIGNATURE:	
(PRINT NAME)	DATE

**AUTHORIZED TO ACT AS APPLICANT FOR PROPERTY OWNER**

I, \_\_\_\_\_, being owner/authorized manager of the rezoning property(s) as described in this Rezoning Application hereby authorize \_\_\_\_\_ to act as my representative in all decisions concerning the rezoning of my property(s) before the Opelika Planning Commission and City Council.

Property Owner's Signature \_\_\_\_\_ Date \_\_\_\_\_

**STATE OF ALABAMA**

**COUNTY OF LEE**

I, \_\_\_\_\_, a Notary Public in and for said County and State, hereby certify that \_\_\_\_\_, whose name is signed to the foregoing document, and who is known to me or acknowledged before me on this day, that being informed of the contents of said document, did execute the same voluntarily on the day that bears the same date.

Given my hand and seal of office this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_

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

My Commission Expires: \_\_\_\_\_

**REZONING APPLICATION REQUIREMENTS AND INFORMATION**

1. Application due 1<sup>st</sup> Tuesday of each month. (Regular Meeting 4<sup>th</sup> Tuesday of each month at 3:00 PM CT; Work Session is 3<sup>rd</sup> Tuesday each month at 3:00 PM CT before each PC Meeting).
2. Complete the 'Authorization to Act as Applicant', if applicable
3. Complete the Rezoning Petition below including signature(s) of property owner(s) and signature(s) notarized
4. Provide Legal Description of rezoning property (same as Exhibit A on petition) *Legal description(s) on deed(s) may serve as legal description if complete.*
5. Provide Map of Rezoning area (same as Exhibit B on petition)
6. Provide copy of the current Deed(s) for the rezoning property
7. Provide List of Adjacent Property Owners on separate sheet.
8. Rezoning Fee = \$125 application fee plus \$6.74 each certified letter. Checks payable to the City of Opelika.

**PETITION FOR REZONING**

TO THE CITY COUNCIL OF THE CITY OF OPELIKA, ALABAMA:

Come now the undersigned (hereinafter referred to as the "Petitioners"), represent and show unto your Honors as follows:

- 1. The Petitioners are the majority of the property owners, owning the majority of property hereinafter described, as follows:

SEE EXHIBIT "A" ATTACHED HERETO AND INCORPORATED HEREIN BY REFERENCE

- 2. There is attached hereto as Exhibit "B" and made a part of this Petition, a map of the above described territory which is proposed to be rezoned.

Come now the petitioners respectfully ask the City Council of the City of Opelika to amend its Zoning Ordinance to change the zoning designation of the area described from a \_\_\_\_\_ zoning district to a \_\_\_\_\_ zoning district.

Notary Public

My Commission Expires: \_\_\_\_\_

**NOTARY SIGNATURES**

Before me, _____, a Notary Public in and for said County and State, hereby certify that _____, whose name is signed to the foregoing petition as _____ [President, Chairman, etc.]	_____ (print name)
of _____, [Corporation, City], and who is known to me, acknowledged before me on this date that be executed the same voluntarily for and as the act of said corporation, being duly authorized to do so, all on the day they say bears date. Given under my hand and official seal of office this the _____ day _____, _____.	_____ (address)
_____ Notary Public	_____ (city, state, zip)
	BY: _____ (signature)
	ITS: _____ (title)
	DATE: _____

<b>I, the undersigned authority, a Notary Public in and for                  Said County and State, hereby certify that</b> _____, <b>whose name is signed to the foregoing petition, and                  who is known to me, acknowledged before me on this                  day, that being informed of the contents of said petition,</b>  <b>he/she executed the same voluntarily on this date.                  Given under my hand and official seal of office this                  _____ day of _____,</b> _____ <b>Notary Public</b>	_____ (Signature)
	_____ (print name)
	_____ (mailing address)
	DATE: _____

<b>I, the undersigned authority, a Notary Public in and for                  said County and State, hereby certify that</b> _____, <b>whose name is signed to the foregoing petition, and                  who is known to me, acknowledged before me on this                  day, that being informed of the contents of said petition,</b>  <b>he/she executed the same voluntarily on this date.                  Given under my hand and official seal of office this                  _____ day of _____,</b> _____ <b>Notary Public</b>	_____ (Signature)
	_____ (print name)
	_____ (mailing address)
	DATE: _____

<b>I, the undersigned authority, a Notary Public in and for                  said County and State, hereby certify that</b> _____, <b>whose name is signed to the foregoing petition, and                  who is known to me, acknowledged before me on this                  day, that being informed of the contents of said petition,</b>  <b>he/she executed the same voluntarily on this date.                  Given under my hand and official seal of office this                  _____ day of _____,</b> _____ <b>Notary Public</b>	_____ (Signature)
	_____ (print name)
	_____ (mailing address)
	DATE: _____