When a property owner desires to have his/her property zoning changed or an agent for the property owner desires a change in zoning, the following procedure must be followed:

1. Applicant must check with Planning Commission staff to determine if the request is properly in line with the General Plan or Future Land Use Plan. If the request does not meet the General Plan or Future land Use Plan, then a letter from the property owner requesting an amendment to the appropriate plan is required with the application.

2. The applicant must submit the following:
   a. Completed application no later than 28 days prior to desired hearing date
   b. Application fee $250 (Holcomb $200)
   c. Copy of the Deed to property affected
   d. Certified list of surrounding property owners within 1,000ft from a title company (County)
   e. Letter requesting amendment to land use plan
   f. Any documents which the Staff of the Planning Commission deems necessary

3. The applicant must sign the Rezoning Application in the presence of a Notary. If the applicant is not the property owner, the property owner must also sign the application. A copy of the purchasing contract may be submitted in lieu of the current property owner’s signature.

4. The applicant should be familiar with the authorized uses for the zone requested. Some uses require a Conditional Use Permit, which may require an application and hearing before the Board of Zoning Appeals after the rezone is complete.

5. The Planning Commission Staff will publish the notices in the newspaper and send notices by mail.

6. The Planning Commission meets regularly on the 3rd Thursday of every month at 9:00 a.m.

7. The applicant or representative shall be present at the meeting.

For questions or help filling out the application, please contact:
Neighborhood & Development Services
301 N. 8th Garden City, KS 67846
(620) 276-1170

Application Deadline: ________________________________
Planning Commission Meeting: ________________________________
Governing Body Meeting: ________________________________
APPLICATION FOR ZONING CHANGE
TO
HOLCOMB-GARDEN CITY-FINNEY COUNTY AREA PLANNING COMMISSION

CASE NO: ____________

APPLICATION FEE: $250.00/$200.00

DATE: ________________

RECEIPT NO. ______________

Address to Property to be rezoned: ________________________________________________________________

COPY OF DEED ATTACHED: ________YES ________NO

Applicant/Agent: ____________________________ Phone: ____________________________
(Print or Type Name)

Address: ______________________________________

Signature: ______________________________________

Owner (If different): ____________________________ Phone: ____________________________
(Print or Type Name)

Address: ______________________________________

Signature: ______________________________________

PRESENT ZONING: ________________ PRESENT USE: ____________________________

PROPOSED ZONING DISTRICT: ________________________________________________________________

REQUEST CONFORMS WITH PLAN: ________YES ________NO

LETTER REQUESTING AMENDMENT TO LAND USE PLAN ATTACHED: ____ YES____ NO

CERTIFICATE OF OWNERSHIP ATTACHED: ________YES ________NO

HEARING DATE: ____________________________________________________________

EARLIEST HEARING BEFORE GOVERNING BODY: ____________________________ (Date)

STAFF USE: Application is complete as submitted from the Applicant; Case number is assigned; Receipt has been made and noted here on; Staff portions of Application are complete.

Signature: ____________________________ Date: ____________________________
VERIFICATION

STATE OF KANSAS  )
                  ) Ss.
COUNTY OF FINNEY )

I do hereby certify upon my oath that I have read the above Application for Rezoning and I know the contents thereof to be true and correct of the best of my knowledge.

___________________________________________
Signature

SUBSCRIBED AND SWORN TO before this ________day of __________________, 20______.

___________________________________________
NOTARY PUBLIC

CERTIFICATE OF OWNERSHIP

I, the undersigned, do hereby certify that on this ______day of __________________, 20____, I am the lawful owner of the following described property, to Wit:

☐ Check here if legal is attached.

___________________________________________
Signature

DECLARATION OF RESTRICTION

I hereby state as registered proprietor of land, if said application for rezoning is granted by the Governing Body of Finney County, Kansas, that said use of land would be solely that which is authorized within the zoning classification, and recognize such conditions as set forth in the approval. And henceforth if said use is abandoned or change proposed, that the subsequent use shall be in conformance with the zoning restrictions then in effect as to the land, unless a notice of application for a change is filed and consent obtained by said Governing Body, Finney County, Kansas.

___________________________________________
Signature