



Submittal Requirements for Rezoning property within the City of Statesville's zoning jurisdiction

1. Provide one completed paper copy of the Application as well as a digital copy of the application and all attachments, along with:
2. A copy of the parcel property reports from the Iredell County GIS website for all parcels subject to the rezoning request.
3. The application fee of \$600.00 (\$800.00 for Conditional Zoning application). Cash/ checks payable to the 'City of Statesville' accepted at the Planning Department office; card payments accepted only in person at Finance Department counter in the City Office Bldg. located at 301 S. Center Street, w/receipt submitted with application package.
4. A plat or map of the property requested to be rezoned, indicating the following:
 - a. The parcel or parcels subject to the rezoning request;
 - b. the ownership and zoning classifications of all surrounding properties, including all parcels across rights-of-way and/or other separations from the subject parcel(s);
 - c. all zoning classifications of the parcel subject to the rezoning request and surrounding parcels;
 - d. a vicinity map or location map showing the subject property in relationship to major roads, physical identifiers, or locally known landmarks. The outline of the subject parcel(s) proposed to be rezoned must be shown on this location map (not a star, box, or 'X');
 - e. the metes and bounds description (directions and lengths along the property boundary line) for all individual parcel(s) or portions of parcel(s) requested to be rezoned. Both a paper copy **and** a digital version (Microsoft Word document format) are required; and
 - f. a certified boundary survey for portion(s) of property/properties requested to be rezoned that are not currently an individual tax parcel.
5. Fiscal Impact Model information submittal (see pages 5 - 6)
6. The completed application packet, including fee and all attachments. This packet must be submitted no later than thirty (30) days prior to a desired Planning Board meeting. The

Planning Board meets at 6:00 pm on the fourth (4th) Tuesday of the month in the Council Chambers of City Hall located at 227 S. Center Street.

7. Applicant is required to set up the following meetings with planning staff before application will be accepted:
 - a. Preliminary Sketch meeting (for all applications).
 - b. Pre Application meeting with detailed site plan, (completed concept plan needed if conditional zoning or Planned Unit Development).
 - c. Community Meeting Required before going to Planning Board (for Conditional Zoning and Planned Unit Developments)
 - d. Review of Development Agreement (for Planned Unit Development)
 - e. TRC Review Meeting before going to Planning Board (for Planned Unit Development)

8. For Conditional Zoning requests, a concept plan (on paper, no smaller than 24"x36" in size **and** a PDF), indicating the following minimum items is required. All Conditional Zoning applications shall include a conceptual site plan (known as a 'concept plan'), drawn to scale, and supporting text that, if approved, will become part of the amendment. The concept plan shall include any supporting information and text that specifies the actual use or uses intended for the property and any rules, regulations and conditions that in addition to all predetermined ordinance requirements, will govern the development and use of the property. The applicant shall, at a minimum, include each of the items listed below. The concept plan, including the information detailed below, shall constitute part of the petition for rezoning to a Conditional Zoning District (Section 2.07 of the UDC):
 - A. A vicinity map showing the property's general location in relation to major streets, railroads and waterways.
 - B. A drawing of the parcel, including the parcel identification number. If only rezoning a portion of a parcel, a plat must be provided, drawn to scale, showing the bearings and distances of the portion requested. An accurate metes and bounds legal description for the subject property or properties to be considered for rezoning is required.
 - C. All existing and proposed easements, reservations, and rights-of-way on the property(ies) in question.
 - D. Delineation of areas within the regulatory floodplain as shown on the official Flood Hazard Boundary Maps for the City of Statesville and delineation of watershed boundaries and stream buffers labeled with their respective classifications and impervious calculations.
 - E. For residential uses, the number of units and lot layout where the structures will be located. For nonresidential uses, the approximate square footage of all structures and an outline of the area where the structure will be located.
 - F. Traffic, parking, and circulation plans showing the proposed locations and arrangement of parking spaces and access points to adjacent streets including typical

parking space dimensions and locations along with typical street cross sections. This shall include all existing and proposed points of access to public streets.

- G. All proposed setbacks, buffers, screening, landscaping, and list of architectural materials proposed by the applicant and required by the UDC.
- H. Generalized information on the number, height, size, and location of structures.
- I. The proposed phasing of the project.
- J. The location and description of any outdoor lighting.
- K. All conditions and/or use limitations and conditions as proposed and/or imposed for the requested district
- L. Additional Information: When dealing with the Conditional Zoning District process, additional information may be requested to evaluate a proposed use and its relationship to the surrounding area. Therefore, staff, the Planning Board and/or City Council may request additional information in addition to that required above, as they deem necessary.

The application was accepted by: _____ on _____.

It was found to contain:

- ___ Application: completed in full & signed and dated
- ___ \$600.00 check Standard Zoning (Check # _____)
- ___ \$800.00 check Conditional Zoning (Check # _____)
- ___ Plat/Map for property(ies) to be rezoned
- ___ Location map on plat or map
- ___ Fiscal Impact Model information
- ___ Legal/or metes & bounds description for each property:
 - ___ Paper copy & ___ Microsoft Word version
- ___ Boundary Survey (for requests re: sub-parcels)
- ___ Concept Plan and List of Materials (for Conditional Zoning requests)

INCOMPLETE APPLICATION PACKET WILL NOT BE ACCEPTED

APPLICATION FOR REZONING

Date Filed: _____

TO: PLANNING BOARD AND CITY COUNCIL OF THE CITY OF STATESVILLE:

I (We) do hereby respectfully make application and request the Planning Board and City Council change the Zoning Map of the City of Statesville as hereinafter requested, and in support of this application, the following facts are shown:

1. It is desired and requested that the following property be rezoned from _____ District to _____ District.
2. The property sought to be rezoned is located on _____ street between _____ and _____; Parcel Identification No. _____, as found on Iredell County GIS Tax Maps. Said lot(s) has a frontage of _____ feet and a depth of _____ feet.
3. The property requested for rezoning is owned by: _____ as evidence by deed from _____ recorded in Book, _____, page _____, Iredell County Registry.
4. The following are all individuals, firms, or corporations owning property adjacent to the subject property(ies), including across any public or private street or road:

Name	Street Address and Iredell County PIN #
a. _____	_____
b. _____	_____
c. _____	_____
d. _____	_____
e. _____	_____
f. _____	_____
g. _____	_____
h. _____	_____

(Use additional sheet of paper if necessary; and look up the names on the Iredell.ConnectGIS.com or in the office of the Register of Deeds, if necessary.)

5. If rezoned as requested it is proposed that the property will be put to the following use: _____

6. It is proposed that the following type buildings will be constructed:

7. It is proposed that the following setbacks and off-street parking provisions will be made:

8. Attached is a map which shows the property requested to be rezoned and other surrounding properties and their designated uses.

Name of Applicant/Agent (Print)

Signature of Applicant/Agent

Address of Applicant/Agent

Phone Number of Applicant

E-mail address of Applicant/Agent

Fiscal Impact Model Submittal Information:

1. Project/Neighborhood Name: _____

2. Annexation Required: _____

3. Total Project Acres: _____

4. Total Acres Open Space: _____

5. Unit Types and Number of Units per type:

a. Single Family Detached _____

b. Townhomes/Single Family Attached _____

c. Multifamily _____

d. Other _____

6. Estimated initial sales price per unit type: SF _____ TH _____ MF _____
7. Units added per Year: Year 1: _____ Year 2: _____ Year 3: _____ Year 4: _____ Year 5: _____
8. Estimated value with improvements: _____
9. Estimated new road length: _____
10. Estimated sidewalk length: _____
11. Estimated greenway length: _____
12. Estimated construction year: _____
13. Commercial/Industrial Units: _____
14. Total Commercial/Industrial Square footage: _____
15. Estimated Sewer line length: _____
16. Estimated Water line length: _____
17. Estimated Electric line length: _____

PLANNING AND ZONING BOARD ACTION:

1. Application for Rezoning received on: _____
2. Application received by: _____

Schedule and Action:

1. Planning Board meeting and recommendation of ordinance on:

2. Legal notice that a public hearing would be held to consider the request was advertised
on: _____ and _____
3. City Council Public hearing and introduction of Ordinance (1st Reading) held on:

3. 2nd Reading of Ordinance _____