



**Planning Division
Community Development Department
THE CITY AND COUNTY OF BROOMFIELD**

Project Name: _____ Case No.: _____

CHECK-LIST: ZONING OR REZONING

Please note that unless a requirement is waived in writing, an application missing any of the items below will be considered incomplete and will not be processed.

Pre-Application Meeting

- Highly recommended with a member of the Planning staff at least two weeks prior to plan submittal.

Executed Forms

- Development Application - Signed by Owner and Notarized
 Certificate of Notice For Owner of Severed Mineral Estates - Verify Box Checked & Notarized

Current Proof of Ownership

- Title Commitment - current within 60 days from date of application

Fee for Processing, Noticing and Recording. Check made payable to: The City and County of Broomfield

- If less than 10 acres = \$250
 If more than 10 acres = \$650
 Notice and Publication Fee = \$100

Legal Description

- Legal Description on 8 1/2" by 11" paper for each proposed zone district with drawing of each area as attached exhibits. Provide on disk (Word) if longer than one page

Zoning/Rezoning – Minimum / Initial Requirements

Written description of proposal including responses to the following questions:

- Is the proposed zone district consistent with the Master Plan?
 Are there any known changes in land use, street arrangement, or other physical conditions that have altered the character of the property, or adjoining property, since the present zoning was accepted?
 Why is the property in question more reasonably suited for uses permitted under the proposed zone district versus the current district?

Applicant's Signature _____ Date: _____

Refer to Attachment for additional information and requirements regarding public notices, hearings, etc.

APPLICATION COMPLETE DATE: _____

COMMENTS: