

Application for Amendment

Town of Alberton, MT

This application is used to request an amendment to the Zoning Ordinance of the Town of Alberton, including an amendment to the Zoning Map.	Office Use Only Date: _____ Accepted by: _____ Fee: \$ _____ Cash/Check #: _____ Supporting docs rec'd date: _____
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1. Owner(s) of Record: (attach additional sheets as necessary)

Name: _____

Mailing Address: _____

City/State/Zip: _____ Phone: _____

2. Person(s) authorized to represent the owner(s), their role (e.g. developer, engineer) and to whom a copy of all correspondence is to be sent:

Name: _____

Mailing Address: _____

City/State/Zip: _____ Phone: _____

4. Type of Amendment:

- Map Amendment: Provide a complete and accurate description of the area for which the amendment is requested and a map showing the area.

From _____ zoning district to _____ zoning district. Square feet/Acres _____

Please describe amendment: _____

- Text Amendment: Enter the complete text of the proposed amendment (attach additional sheets as necessary).

5. Please list additional materials submitted in support of your amendment request:

6. Please describe how the amendment request:

- A. Substantially complies with the growth policy;
- B. Furthers the purpose and intent of the zoning ordinance (see Section 13.0103, and address the items in 13.0308.11);
- C. Corrects an inconsistency or error, addresses changing conditions or addresses a specific public challenge such as the need for affordable housing or downtown redevelopment.

Acknowledgement

I hereby certify under penalty of perjury and the laws of the State of Montana that the information submitted herein, on all other forms, documents, plans or any other information submitted as a part of this application to be true, complete, and accurate to the best of my knowledge. Should any information or representation submitted in connection with this application be incorrect or untrue, I understand any approval based thereon may be rescinded and other enforcement action taken. The signing of this application signifies approval for representatives of the Town of Alberton to be present on the property for routine monitoring and inspection during the approval and development process.

Applicant Signature

Date