



**2. WRITTEN NOTIFICATION:** Planning Staff will provide the legal notice and a list of interested parties to be notified by mail with proof provided by Certificate of Mailing. The applicant must mail the legal notice to all interested parties. The notices must be post-marked at least **14 days** before your hearing date. Interested parties are all property owners that are within a 300-foot radius of the property line(s) of the petition site. Additional persons may be notified if required by staff.

**SUBMITTALS TO ZONING ADMINISTRATOR PRIOR TO HEARING:** The Publishers Affidavit from The Star and the Certificate of Mailing receipts (white slips) must be submitted to the planning staff before the hearing date. Failure to do so could cause the petition to not be heard.

**PLAN COMMISSION PUBLIC HEARING:** All proposals subject to Plan Commission approval must undergo a public hearing. The Plan Commission will give a favorable, unfavorable or no recommendation to the County Commissioners. The applicant or representative must attend the meeting and present your case to the Board. The Plan Commission meets on 3<sup>rd</sup> Wednesday of each month. An agenda and staff report will be mailed to you and/or the representative approximately 5-7 days before the hearing date.

**COUNTY COMMISSIONERS MEETING:** Once the Plan Commission hears the case and gives their recommendation, the County Commissioners will hear the petition and grant approval or denial of the proposal. The County Commissioners meeting will be scheduled in accordance with their weekly meeting schedule and in accordance with their availability. The Zoning Administrator will schedule this hearing and inform the petitioner of the date and time.

***IF YOU HAVE ANY QUESTIONS ABOUT THE PROCESS, PLEASE DON'T HESITATE TO CONTACT THE DEPARTMENT ANYTIME: 260-925-1923***

DeKalb County Department of Development Services  
Planning, Building & GIS  
301 S. Union St.  
Auburn, IN 46706  
Ph: 260-925-1923  
Fax: 260-927-4791

FOR OFFICE USE ONLY:  
File Number: \_\_\_\_\_  
Date Application Filed: \_\_\_\_\_  
Fee Paid: \_\_\_\_\_

**Application for Amendment to Zone Map (Rezone)  
(Section 9.06)**

This application must be completed and filed with the DeKalb County Department of Development Services in accordance with the meeting schedule.

**APPLICANT INFORMATION**

Applicant's Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_ E-Mail: \_\_\_\_\_

**OWNER INFORMATION (if different from applicant information)**

Owner's Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_ E-Mail: \_\_\_\_\_

**REPRESENTATIVE INFORMATION (if different from applicant information)**

Representative: \_\_\_\_\_  
Address: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_ E-Mail: \_\_\_\_\_

**Legal Ad Payment & Public Hearing Notifications: Applicant\_\_\_ Owner\_\_\_ Representative\_\_\_**

**Existing Zoning Classification of Property:** \_\_\_\_\_

**Proposed Zoning Classification of Property:** \_\_\_\_\_

**Address or Legal description of property:**  
\_\_\_\_\_  
\_\_\_\_\_

**Percentage of Property Owners Included:** \_\_\_\_\_

**Statement or reason for the request for a Zone Map Amendment:**  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

By my signature, I acknowledge the above information and attached exhibits, to my knowledge and belief, are true and correct.

Applicant's Signature: \_\_\_\_\_  
(If signed by representative for applicant, state capacity)