

Zone Ordinance Amendment

City of Irwindale

Planning Department

City Use:

Date _____

Case Number _____

Code Sections _____

Project Name _____

Address _____

Applicant _____ Phone _____ Fax _____

General Plan Designation _____ Current Zoning _____

Current Land Use _____

Requested Zoning _____

Reason(s) a Zone Ordinance Amendment is requested (is there a need for clarifications or additions to the zoning ordinance to better address land use needs?) _____

Justification

Do you view this request as being consistent with the policies of the General Plan? _____

What community benefits would result from the requested Zone Ordinance Amendment? _____

What adverse effects might occur to properties similarly zoned?

What conditions have changed since zoning was created, to warrant a Zone Ordinance Amendment?

This is an attachment of the General Application, covered by the Applicant s Certification.

Withdrawals: Applications may be withdrawn prior to the Planning Commission Hearing by submitting a written request. Filing fee refunds will be based upon the amount of City staff work accomplished prior to the withdrawal.

<i>City Use:</i>	
<u>Submittal Check List</u>	
<i>General Application</i>	
<i>Environmental Questionnaire</i>	
<i>Filing Fee</i>	
<i>Check to L.A. County Clerk</i>	
This Application is complete. _____	
Planner	Date
<u>Public Notices</u>	
<i>Published</i> _____	
<i>Mailed</i> _____	
<i>Posted</i> _____	