

PLANNING COMMISSION APPLICATION



City of Shawnee Planning Department

222 N. Broadway
Shawnee, OK 74801
(405) 878-1616 Fax (405) 878-1587
www.ShawneeOK.org

For Office Use Only

Case Number: _____

Project Number : _____

Date Filed: _____

Planning Commission Secretary

REQUEST:

____ Resoning

____ Conditional Use Permit

____ Resoning w/Conditional Use Permit

____ Planned Unit Development

I, the undersigned, do hereby respectfully make application and petition to the City Commission to amend the zoning map, and to change the zoning district of the Shawnee area, from _____ District to _____ District, as hereinafter requested, and in support of this application, the following facts are shown:

PROPERTY LOCATION (STREET ADDRESS): _____

LEGAL DESCRIPTION: _____

PROPERTY OWNER (S): _____

PROPERTY AGENT (APPLICANT): _____

APPLICANT'S ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

EMAIL ADDRESS: _____

TELEPHONE NUMBER: (____) _____ CONTACT NUMBER:(____) _____

DIMENSIONS OF PROPERTY: AREA: _____ WIDTH: _____

LENGTH: _____ FRONTAGE: _____

CURRENT ZONING: _____ **CURRENT USE:** _____

PROPOSED ZONING: _____ **PROPOSED USE:** _____

With the filing of this application, I acknowledge that I have been informed of off-street parking, fencing and paving requirements in regard to the zoning I have requested as witnessed by my signature.

**APPLICATION, OWNERSHIP LIST AND PAYMENT
MUST BE RECEIVED 30 DAYS PRIOR TO MEETING**

SIGNATURE OF APPLICANT

FOR STAFF USE ONLY

REZONING &/OR C.U.P FEE \$ 280.00

RECEIPT NO. _____

PLANNED UNIT DEVELOPMENT FEE \$ 550.00

SIGN DEPOSIT \$ 50.00

(Refundable if Applicant returns 48 hrs. after City Commission Meeting)

PLANNING COMMISSION ACTION: _____ **DATE:** _____

CITY COMMISSION ACTION: _____ **DATE:** _____

PLACE ON ZONING MAP: _____ **ORDINANCE NO.:** _____

2020 CALENDAR YEAR
SCHEDULE OF REGULAR MEETINGS

PLANNING COMMISSION

DATE	TIME	PLACE OF MEETING
<u>January 8, 2020</u>	<u>1:30 PM</u>	<u>Commission Chambers</u> <u>Room at City Hall</u>
<u>February 5, 2020</u>	<u>1:30 PM</u>	<u>Commission Chambers</u> <u>Room at City Hall</u>
<u>March 4, 2020</u>	<u>1:30 PM</u>	<u>Commission Chambers</u> <u>Room at City Hall</u>
<u>April 1, 2020</u>	<u>1:30 PM</u>	<u>Commission Chambers</u> <u>Room at City Hall</u>
<u>May 6, 2020</u>	<u>1:30 PM</u>	<u>Commission Chambers</u> <u>Room at City Hall</u>
<u>June 3, 2020</u>	<u>1:30 PM</u>	<u>Commission Chambers</u> <u>Room at City Hall</u>
<u>July 1, 2020</u>	<u>1:30 PM</u>	<u>Commission Chambers</u> <u>Room at City Hall</u>
<u>August 5, 2020</u>	<u>1:30 PM</u>	<u>Commission Chambers</u> <u>Room at City Hall</u>
<u>September 2, 2020</u>	<u>1:30 PM</u>	<u>Commission Chambers</u> <u>Room at City Hall</u>
<u>October 7, 2020</u>	<u>1:30 PM</u>	<u>Commission Chambers</u> <u>Room at City Hall</u>
<u>November 4, 2020</u>	<u>1:30 PM</u>	<u>Commission Chambers</u> <u>Room at City Hall</u>
<u>December 2, 2020</u>	<u>1:30 PM</u>	<u>Commission Chambers</u> <u>Room at City Hall</u>

Name: Shalah Black, Secretary
Address: P.O. Box 1448
Shawnee, OK 74802-1448
Phone Number: (405) 878-1616

Filed in the office of the municipal clerk at _____ am/pm on _____, 2019.

Signed _____
Clerk/Deputy Clerk