

**APPLICATION FOR ZONING MAP AMENDMENT  
VERSAILLES-MIDWAY-WOODFORD COUNTY, KENTUCKY**

Application No. \_\_\_\_\_

The undersigned, owner(s) of the following legally described property hereby request the consideration of a change in zoning district classification as specified below:

1. Name of Legal Owner \_\_\_\_\_  
Mailing Address \_\_\_\_\_  
Phone No. \_\_\_\_\_ E-mail Address: \_\_\_\_\_
2. Name of Applicant (If different than owner) \_\_\_\_\_  
Mailing Address \_\_\_\_\_  
Phone No. \_\_\_\_\_ E-mail Address: \_\_\_\_\_
3. Attorney or Representative (optional) \_\_\_\_\_  
Address \_\_\_\_\_  
Phone No. \_\_\_\_\_ E-Mail Address: \_\_\_\_\_
3. Address of Subject Property: \_\_\_\_\_
4. Legislative Authority: \_\_\_\_\_ Versailles \_\_\_\_\_ Midway \_\_\_\_\_ Fiscal Court
5. Exact Location and Size of Subject Property: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
6. Existing Zoning District and Existing Use: \_\_\_\_\_  
\_\_\_\_\_
7. Proposed Zoning District and Proposed Use: \_\_\_\_\_  
\_\_\_\_\_
8. Section of Zoning Map being Amended: \_\_\_\_\_
9. Deed Book # and Page # of Property Description and/or Plat Cabinet & Slide #.  
DB# \_\_\_\_\_ PG# \_\_\_\_\_ Plat Cab. \_\_\_\_\_ SL # \_\_\_\_\_.
10. Supporting Information: The following items must be attached or submitted with the application:
  - A. A Preliminary Development Plan and/or Preliminary Subdivision Plat (14 copies)
  - B. A list of all property owners and mailing addresses within, contiguous to, and directly across the street from the subject property for which the proposed rezoning is requested.
  - C. A statement of how the proposed rezoning relates to the current Comprehensive Plan.
  - D. Reasons why the zoning should be changed (KRS 100.213).

Application No.: \_\_\_\_\_

**CERTIFICATION:**

I do hereby certify that, to the best of my knowledge and belief, all application materials are herewith submitted, and the information they contain is true and correct. I further certify that I am OWNER \_\_\_ or HOLDER \_\_\_ of an agreement to purchase this property since \_\_\_\_\_.

**Signature(s) and Date**

\_\_\_\_\_  
**Applicant** (Sign & Print)

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Owner** (Sign & Print)

\_\_\_\_\_  
**Date**

Application No.: \_\_\_\_\_

**For Official Use Only – (Planning Commission)**  
Versailles-Midway-Woodford County, Planning Commission- Kentucky

Date Filed: \_\_\_\_\_

Date of Notice in Newspaper: \_\_\_\_\_

Date of Notice to Adjacent Property Owner(s): \_\_\_\_\_

Date of Public Hearing(s): \_\_\_\_\_

Recommendation of Planning Commission: Approval \_\_\_\_\_ Denial \_\_\_\_\_

Reason for Recommendation \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Date

Planning Commission/Chairman



**For Official Use Only – (Legislative Authority)**

Zoning Map Section # \_\_\_\_\_

Date of Recommendation Received: \_\_\_\_\_

Date of Notice in Newspaper: \_\_\_\_\_

Date of Public Hearing: \_\_\_\_\_

Date of 1<sup>st</sup> Reading: \_\_\_\_\_

Date of 2<sup>nd</sup> Reading: \_\_\_\_\_

Date of Final Publication in Newspaper: \_\_\_\_\_

Action by Legislative Authority: Approval \_\_\_\_\_ Denial \_\_\_\_\_

Reason for Recommendation \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Date

Clerk

**NOTE: Three copies of this form and supporting information must be filed with the Versailles-Midway-Woodford County Planning Commission and all fees paid before the application shall be placed on the agenda.**