



City of Hamilton, MT

Zone Map Amendment Application

Office use only	
File #:	_____
Submit Date:	_____
In-take staff:	_____
Date Complete:	_____

General Information:

1. Read through submittal requirements thoroughly. **Incomplete applications will be returned.**
2. Applicants are encouraged to schedule a pre-application meeting with planning staff prior to applying for a zone map amendment. Meetings can be arranged by emailing dpwsec@cityofhamilton.net.
3. One hard copy and one electronic copy of the application are required for review. Electronic copies of applications can be emailed to dpwsec@cityofhamilton.net or submitted on a USB flash drive.
4. Once the application has been deemed complete and sufficient for review, a public hearing will be scheduled at the next Zoning Commission meeting for which 15-day notice requirements can be met. The Zoning Commission meets the first Monday of the month when there is a zone change on the agenda.
5. Following the Zoning Commission public hearing the application will be forwarded to the City Council with the Commission's recommendation. Zone Map Amendments require a public hearing and two readings before City Council and, if approved, go into effect 30-days after the second reading.
6. Signatures below certify that the information contained in this application is true and correct and signifies approval for City staff to be present on the property during the review and development process.

APPLICANT INFORMATION:

Name: _____ Phone: _____

Address: _____

Email: _____

Signature _____ Date _____

PROPERTY OWNER(S) INFORMATION: (attach additional sheets if multiple property owners)

Name: _____ Phone: _____

Address: _____

Email: _____

Signature _____ Date _____

REPRESENTATIVE INFORMATION:

Name: _____ Phone: _____

Address: _____

Email: _____

Signature _____ Date _____

PROJECT INFORMATION:

Property Address: _____

Legal Description:

Tax ID: _____ Gross Acres: _____ # of lots: _____ # of Parking Spaces _____

Current Zoning _____ Proposed Zoning _____

Intended Use of Property _____

Purpose of Zone Map Amendment:

ZONE MAP AMENDMENT CRITERIA:

Zone Map Amendments are reviewed in light of the criteria below. Please provide responses to the following questions. Be specific, blanket "yes" statements are not acceptable. Provide additional sheets if needed.

1. Is the proposed zoning in accordance with the City of Hamilton Growth Policy?

2. Is the proposed zoning designed to secure safety from fire and other dangers?

7. Does the proposed zoning promote compatible urban growth?

8. Does the proposed zoning consider the character of the district, and its suitability for particular uses?

9. Does the proposed zoning conserve the value of buildings?

10. Does the proposed zoning encourage the most appropriate use of land throughout the City?

ZONE MAP AMENDMENT APPLICATION CHECKLIST:

Attached

Hard copy & electronic version of entire application & supplementary documents

\$850 Application fee

A copy of the Deed or Notice of Purchaser's Interest, documenting ownership of property(s)

A copy of the plat showing the property for which the amendment is being requested.
