APPLICATION TO AMEND LAND DEVELOPMENT REGULATIONS (LDRs)

Amendment to table of permitted uses ($4,000)
Other amendment to LDRs ($2,500)

Due Date: First Monday of each month, 5 p.m., for the meeting on the second Monday of the following month.

1. Name of Petitioner(s):

2. Address of Petitioner(s):

City ___________________   State _________   Zip Code ______________   Phone # __________________
Fax # _____________________     Email address __________________________________________

3. Site the section of the LDRs that you wish to have amended:

4. Explain the reason for the amendment:

5. The following items are required to complete this application before advertisement may be made for a public hearing:
   a. A copy of the proposed text change
   b. A copy of the proposed ordinance in strike out and underline form
   c. Petitioner’s notarized signature, and agent’s signature if agent is used
   d. Appropriate fee in cash, or check (Payable to the City of Ocala)

I, _____________________________________________, being first duly sworn, affirm and say that I am the owner of the property described above.

Owner’s Signature ___________________________________ Address (Street)
Phone Number _________________________ City, State, Zip Code

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Revised 5/5/10
State of _____________________

County of ___________________

The foregoing instrument was acknowledged before me this _______, day of _________________, 20_______,
by ________________________________________________, who is personally known to me or has produced
______________________________________________ as identification and who did / did not take an oath.

____________________________________
NOTARY PUBLIC

Commission No.: _____________________

Commission Expires: __________________

I, _____________________________________________, am the legal representative of the owner and I am
authorized to speak in his/her behalf for the subject matter.

________________________            __________________________
Agent’s Signature            Address (Street)

________________________            __________________________
Phone Number            City, State, Zip Code

________________________
Email Address

ATTENDANCE at the public hearing by the applicant
or agent (as designated in writing) IS MANDATORY

STAFF USE ONLY:

a. Date received: __________________________
b. Petition has been checked and found to contain all required information:    Y         N
c. Case number assigned: _____________________