



REQUEST FOR ZONING CHANGE

To determine whether your request for a zoning change meets the criteria as set forth by the City of Leon Valley, please carefully read the stated definitions, purposes, time limitations, submittal requirements, and approval processes below.

Definition:

An application for a legislative change of an existing comprehensive zoning ordinance authorized by Chapter 14 "Zoning" of the City of Leon Valley Code of Ordinances. Two separate public hearings are held for the purpose of determining whether the proposed zoning change demonstrates:

- consistency and compatibility with the current Master Plan, with surrounding zoning districts, and with site and surrounding uses;
- protection of the health, safety, and welfare of the general public; and/or
- protection and preservation of the property rights of the owner(s) of all real property affected by the proposed change in zoning districts.

Purpose:

To review a proposed zoning change request to determine:

- whether proposed zoning is appropriate for the requested site; **AND**
- whether it meets the above criteria in whole or in part.

Time Limitations:

No application for the rezoning of any land shall be received or filed with the Commission if within 6 months prior thereto, an application was received or filed on the same property. This time restriction shall apply whether said zoning application was withdrawn before or after action by the Commission and whether or not final hearing and action had been filed by the Leon Valley City Council.

Additionally, all new commercial construction within the City of Leon Valley requires a Specific Use Permit. This Permit is a separate application that also requires two separate public hearings. More information may be obtained from the Community Development Department.

Submittal Requirements:

A complete Development Package (DP) must be submitted to the Community Development Department **no later than the first working Monday of the month** (or no less than 25 days prior to the [City Council meeting](#) when hearings are scheduled separately).

City staff review of this application is dependent upon the accuracy of information provided. Thereby, inaccurate, incomplete, or inadequate information provided by the applicant or the applicant's agent will delay the proper review of the submitted project and/or cause the return of this application.

Approval Process:

1. Interdepartmental staff review of application (max. of 5 working days);
2. Notice of public hearing mailed to adjacent property owners (within 200 feet of subject site) and published in the official city newspaper (min. of 15 days prior to meeting date);
3. Resolution of all review comments by applicant and resubmittal of DP no later than 10:00 a.m. on Tuesday of the week preceding the Zoning Commission meeting (if you are required to amend and resubmit initial documents, five sets of resubmitted documents are required for subsequent review by officials);
4. Zoning Commission review of the case information and public hearing held (4th Tuesday of the month, **recommendation** considered);
5. City Council review of the case information and public hearing held (no later than the 2nd Tuesday of the following month, **approval or disapproval** considered); **and**
6. Property receives zoning change, if approved, and official City zoning map is amended.



INSTRUCTION SHEET

In order to apply for a zoning change, a complete Development Package (DP) must be submitted **no later than the first working Monday of the month** (or no less than 25 days prior to the [City Council meeting](#) when hearings are scheduled separately). The DP consists of:

1. *One* completed and notarized application form;
2. *Seven* copies of 8.5" x 11" zoning location maps (folded if 24" x 36");
3. *One* Land Use Statement detailing purpose of request;
4. *One* Traffic Impact Analysis Worksheet (a sealed Traffic Impact Analysis may be required upon staff review);
5. *One* copy of filed plat **OR** field notes and map of survey, containing metes and bounds description tied to block corner with surveyor's seal;
6. *One* certified mailing list with corresponding self-addressed mailing labels for all property owners within 200 feet of the subject site;
7. Fee based on property acreage and hearings required (see fee schedule below). Fee must be paid upon submission of the DP and can be paid by cash, check, or credit card.

Fee Schedule:

| Acreage | Commission Hearing | Council Hearing | TOTAL |
|--------------------------|--------------------|-----------------|------------|
| 1.0 or less | \$290.00 | \$290.00 | \$580.00 |
| Over 1.0 and up to 10.0 | \$480.00 | \$480.00 | \$960.00 |
| Over 10.0 and up to 25.0 | \$725.00 | \$725.00 | \$1,450.00 |
| Over 25.0 | \$850.00 | \$850.00 | \$1,700.00 |



ZONING APPLICATION FORM
(please print or type in black)

Personal Information

Name of Applicant: _____

Address: _____

Phone No: Home () Work () Fax () _____

Status (check one): Owner Agent (if agent, attach notarized Letter of Authorization)

Property Description

Address: _____

Legal Description: _____

Current Zoning: _____ Requested Zoning: _____

Existing Property Use or State None: _____

Acreage and/or Square Footage: _____

Does owner own adjacent property? Yes No

List Existing Structures: _____

and/or

Existing Uses: _____

I hereby certify that I have read and examined this application and the attached instruction sheet and know the information I have provided to be true and correct. All provisions of laws and ordinances governing this application will be complied with whether specified herein or not. The granting of a zoning change does not presume to give authority to violate or cancel the provisions of any other state or local law regulating the use of the property.

Signature of Applicant

Date

BEFORE ME, A Notary Public in and for _____, on this date personally appeared _____ (Applicant) who duly states that all facts on this application are true to the best of his/her knowledge.

SWORN TO and **SUBSCRIBED** before me this ____ day of _____, 20__.

SEAL

Notary Public, Bexar County, Texas

My Commission expires: _____

MAILING LIST OF PROPERTY OWNERS TO BE NOTIFIED

Instructions:

1. Please print/type names and addresses of the applicant, representative, property owners, and all owners of property within 200 feet of the subject site listed with the [Bexar County Appraisal Rolls](#) (as indicated on the map provided by applicant).
2. The names listed below should be keyed to the map, indicating specific property owned.
3. Provide the City with corresponding **pre-addressed labels of property owners** listed below.

NOTE: If a property owner holds more than one lot (same mailing address for different lots), make only **one** mailing label for that property owner and write "Same Owner as # _____" on the attached mailing list.

I certify that the names, addresses, and zip codes listed below are those listed on the current Bexar County Tax Roll.

Signature of Applicant
(Owner or Authorized Agent)

Date

SWORN TO and **SUBSCRIBED** before me this ____ day of _____, 20 ____.

SEAL

Notary Public, Bexar County, Texas

My Commission expires: _____

Applicant Name: _____

Address: _____

Representative Name: _____

Address: _____

Property Owner Name: _____

Address: _____

