



Codes & Planning

201 S. Franklin St.  
Kirksville, MO 63501  
Phone: 660.627.1272  
Fax: 660.627.1026  
www.kirksvillemo.com

## Rezoning Application

General location of property: *(use street intersections if possible)*

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Street address of property: *(note "n/a" if site is vacant)*

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Size of tract: *(expressed in acres)* \_\_\_\_\_

Deed to property recorded in book: \_\_\_\_\_ page: \_\_\_\_\_

Present zoning classification: \_\_\_\_\_

Requested zoning classification: \_\_\_\_\_

Present use(s) of property: \_\_\_\_\_

Reason for requesting zoning change: \_\_\_\_\_

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\*\*\*An Abstract Company must be contacted in order to begin the process of notifying property owners within 185 feet of the lot requesting the rezoning. This is to be done by the owner.\*\*\*

The following information for the **OWNER, CONTRACT PURCHASER** (if applicable), and **AGENT** must be attached on a separate paper and submitted with this application:

- ◇ Name, address, city, state, zip, phone, email address
- ◇ Detailed legal description of property
- ◇ **IMPORTANT NOTE** : This application and additional documents have to be submitted at least 30 days prior to the next meeting to process the request.

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Owner/Agent Signature

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Date

Submit completed form to:  
City Planner  
City of Kirksville  
201 S. Franklin St.  
Kirksville, MO 63501

For internal use:

Date reviewed by City Planner: \_\_\_\_\_

Date approved by Planning & Zoning Commission: \_\_\_\_\_

Date approved by City Council: \_\_\_\_\_