Please provide this completed form with your rezoning application. Payment is required following a completeness review of the rezoning application by Cary staff.

PROJECT INFORMATION

Project Location __________________________________________________________

Project Description __________________________________________________________

SUBMITTAL CHECKLIST

Please check all that apply

☐ Complete Rezoning Application, including:
  ☐ Applicant’s Justification Statement(s)
  ☐ Owner’s signature(s)

Legal Forms

☐ Affidavit(s) of proposed zoning conditions (for Conditional Use (CU), Planned Development District (PDD), or Mixed-Use District (MXD) cases)

☐ Proof of Power of Attorney, or redacted Purchase Contract if applicant is an authorized agent rather than the property owner

☐ Disclosure statement (if applicable)

Supporting Materials or Exhibits

☐ For MXD rezoning: Preliminary Development Plan and applicable information as specified in Land Development Ordinance (LDO) Section 3.4.5(B)(2)(a)

☐ For PDD rezoning or amendment: Master Land Use Plan and PDD Document

☐ For Conditional Use cases: Concept plan (optional), per LDO Section 3.4.2(C)(2)

☐ Annexation Petition (required if any portion of the property is outside of Town Limits AND extraterritorial jurisdiction (ETJ))

☐ Property Survey (if rezoning proposes multiple zoning districts or applies to a portion of a parcel)

☐ Traffic Study/Traffic Impact Analysis (TIA) (if applicable, draft TIA results must have been submitted to the Town prior to submitting Rezoning Application)

☐ Rezoning Application Fee: $______________ (see Operating Budget, Attachment A for fees)

Staff will perform a completeness check of your application package within the first week after submittal, at which time incomplete applications will be returned to the applicant.

If you have any questions, please contact us at 311 in Cary or (919) 469-4000 or DevelopmentSupport@townofcary.org.

APPLICANT VERIFICATION

I hereby certify that the information provided is complete and accurate, and that any incomplete or missing information may result in the application being returned to the applicant without review.

________________________________________  ______________________________________  ________________
Applicant Name (print)  Applicant Signature  Date

Email ______________________________________  __________________________  _________
Phone (_____) _______