



**CITY OF TEHACHAPI**  
**APPLICATION FOR REZONING**

WE, THE UNDERSIGNED property owners hereby request the Rezoning of the following described property  
from \_\_\_\_\_ District to \_\_\_\_\_

NOTE: If more than one (1) Zone Change is being requested, describe each parcel separately and indicate Zone requested for each.

Assessor's Parcel Number \_\_\_\_\_ Acreage \_\_\_\_\_

**GENERAL INFORMATION:**

1. Existing Zoning: \_\_\_\_\_
  
2. Present Land Use: \_\_\_\_\_
  
3. Surrounding Land Use:  
North: \_\_\_\_\_  
  
South: \_\_\_\_\_  
  
East: \_\_\_\_\_  
  
West: \_\_\_\_\_
  
4. General Plan Designation: \_\_\_\_\_

The following attachments are mandatory for this application to be processed:

A. PROPERTY MAP – (Assessors Parcel Map, Title Map or Subdivision Map.) Drawn to scale and sufficiently legible to verify accuracy of legal descriptions submitted above.

B.	<b>Application Fee</b>	<b>\$3,837.00</b>
	<b>Technology Fee</b>	<b>\$230.22</b>
	<b>Long Range Planning Fee</b>	<b>\$287.78</b>
	<b>Total</b>	<b>\$4,355.00</b>

*Environmental fee may apply*

**As part of the review process of your project, you will be required to post signs on your property giving notice of your proposal. A Posting Public Hearing Signs Application must be submitted with this application**

**By signing, the undersigned certifies that he/she has read and understood the submittal requirements outlined, and that he/she understands that omission of any listed item may cause delay in processing the application. I (we), the undersigned, acknowledge that the information supplied in this application is complete and accurate to the best of my (our) knowledge.**

_____	_____
Applicant's signature	Property owner's signature
_____	_____
Applicant's printed name	Property owner's printed name
_____	_____
Date	Date