

# **Charles County Department of Planning & Growth Management**

# **Local Map Amendment Application- Planned Development Zone**

I. <u>Application</u>	n Information					
Applicant Name:		Phone Number:				
Address:						
	(Street)	(City)	(State)	(Zip Code)		
Interest of Applicant:			Date:			
Contract Purchaser/A	gent/Owner)					
II. Description	n of Requested Amendm	ent				
		f Charles County by reclassifying the pro	perty described below a	s follows:		
Reclassification FROM	vi Zone:					
Reclassification TO Zo	one:					
III. <u>Property D</u>	escription					
Site Address:	(Street)	(City)	(State)	(Zip Code)		
	, ,	,				
Subdivision Name:		Election District:				
Census Tract:	Con	nprehensive Plan Land Use Designation	n(s):			
Is the property withi	in the Chesapeake Bay Critica	ıl Area: 🗆 Yes 🗆 No				
	_					
	d Property Maps	relation to major roads, public facilities,	and natural foatures mu	ust ha included		
vith this application.	ing the property's location in i	relation to major rodus, public facilities,	and natural leatures Mu	st be iliciuded		

### The application shall include a Property Map with the following information:

- ✓ Property boundaries outlined in red for which the amendment is sought
- $\checkmark$  Bearing and distance of property line and limits of easements on or adjacent to the property
- ✓ Names and widths of adjacent streets and roads
- ✓ North arrow and drawing scale
- ✓ Location of adjacent parcels, tracts or lots within one (100) feet of the property



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#### V. Master Plan Information

Provide a proposed Master Plan containing all of the information required in Appendix A of the Charles County Zoning Ordinance. The proposed Master Plan must include any information necessary to evaluate the proposal regarding the criteria addressed and based on, but not limited to, the following criteria from Section 103 of the Zoning Ordinance:

- ✓ A schedule for beginning and completion of each construction phase and projected market absorption.
- ✓ Architectural sketches of typical proposed structures, typical recreation areas, typical landscaping and screening areas, and typical development clusters
- ✓ A report showing the relationship of the proposed development on the County
- ✓ A statement showing the relationship of the proposed development to the Comprehensive Plan
- ✓ A preliminary analysis of the proposal's impact on public facilities and measures proposed to address these impacts. Public facilities include roads, schools, water, sewer, parks, and fire and police services
- ✓ A statement of which categories and point values the applicant seeks to achieve in Step 1 of the DGS.
- ✓ A description of the surrounding area of the subject property that will be affected by the amendment

## VI. Neighborhood Definition and Compatibility

The following information must be included with this application:

- ✓ A description of the area which constitutes the neighborhood of the property subject to amendment
- ✓ A statement indicating how the proposed amendments is compatible with the neighborhood
- ✓ A Neighborhood Definition Map indicating the properties included in the neighborhood

### VII. Adjoining and Confronting Property Ownership

A listing of all persons, organizations, corporations or groups owning land adjoining or confronting the property for which the Local Map Amendment is requested must be provided as a separate attachment to this application. Please title this document as "Adjoining and Confronting" and include the full name and address for each entity listed as it is shown on the current assessment records of the Maryland Department of Assessments and Taxation.

## VIII. Owner Information

This application shall include the name, mailing address, and signature of each record owner of the property for which the amendment is being sought. If owned by a corporation, this application must be signed by the officer empowered to act for the corporation.

Owner Name:			Phone Number:		
Address:					
	(Street)	(City)	(State)	(Zip Code)	
Owner Signature:			Date:		



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Owner Name:		Phone Number:			
Address:					
	(Street)	(City)	(State)	(Zip Code)	
Owner Signature:			Date:		
Owner Name:		Phone No	umber:		
Address:					
	(Street)	(City)	(State)	(Zip Code)	
Owner Signature:			Date:		
Failure to provide a com application to the applic	cant. In addition to the appl	— equired documents and attachments ication and required attachments, th	= = = = = = = = = = = = = = = = = = = =		
✓ If two or more p	parcels are included, they m	<ul><li>5) copies of the Master Plan.</li><li>ust be adjoining and ownership must property having separate boundaries</li></ul>		is not the case,	
hereby certify that this	application for a Compreh	ensive Plan Amendment is complete	and the information pro	vide is correct.	
Applicant Signature:			Date:		
Print Name:			Date:		