



**City of Bessemer**  
Application for Rezoning  
Planning & Zoning Commission

Date: \_\_\_\_\_

Name of Applicant: \_\_\_\_\_ Phone: \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Owner of Property: \_\_\_\_\_ Phone: \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Legal Description of Property: Map Book: \_\_\_\_\_ Page: \_\_\_\_\_

Address of Property: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Parcel Identification Number: \_\_\_\_\_

Zone Requested: \_\_\_\_\_

Present Use: \_\_\_\_\_

Scheduled for Hearing: \_\_\_\_\_

Zone Requested: \_\_\_\_\_

Proposed Use: \_\_\_\_\_

Reason for Rezoning Request: \_\_\_\_\_

- Attached Tax Map of Property Showing Zoning & Zoning of Adjacent Property.
- Attached Copy of Ownership Deed.
- Attached Preliminary Site Plan.
- Attached Additional Pages as Necessary.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Disposition