



Ordinance Amendment Request

FEE: \$500.00

APPLICATION DATE: _____

ORDINANCE NUMBER TO BE AMENDED: _____

Please use the Re-Zoning Application for any zoning-specific amendment requests

REQUIRED APPLICATION MATERIALS

1. Signature of form and payment of fee.
2. Description of proposed amendment and section of Winsted Municipal Code it applies to.

Applicant: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone Number: _____ Other Number: _____

Amendment Requested: (Please include additional pages if necessary to describe the proposed amendment)

PROCESS:

All Ordinance Amendment Requests require a Public Hearing. Depending on the specific request, the hearing may be conducted by the Planning Commission or the City Council. Any Planning Commission recommendations must be approved at a subsequent City Council meeting.

Depending on the type of amendment, the City may notify property owners within 350 feet of the property affected by the requested amendment.

AN APPLICATION NOT FULLY COMPLETED OR WITH MISSING SUBMITTAL ITEMS WILL NOT BE ACCEPTED AND DEEMED AN INCOMPLETE APPLICATION.

I understand and agree to the conditions and process set forth for an Ordinance Amendment Request. I further acknowledge that my application fee is non-refundable.

Signature of Applicant

Date