LEGISLATIVE # 110941D







LI MINING DIVISION

APPLICATION—CITY PLAN BOARD—TEXT AMENDMENT FEB 1 5 2012 Planning & Development Services

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	Tax Map No.	Receipt No	
	Account No. 001-670-67	10-3401 []	Management
	Account No. 001-670-67	10-1124 (Enterprise Zone) []	
		10-1125 (Enterprise Zone Credit [1
Andrew (85)	Name of	Applicant/Agent (Please print or ty)	pe)
	it/Agent Name: City Pl	gn Board	
		30× 490	
City:	GAINESVIILE		
State:	AL-	Zip: 32601	
siaic.			
	t/Agent Phone:	Applicant/Agent Fax:	
Applican			ment to Chapter 30 of the City of
Applican Note: It i. Gainesvill Departme. und petitio	s recommended that anyone in le Code of Ordinances (Land I nt of Community Development	tending to file a petition for a text amend Development Code) or to the Comprehens prior to filing the petition, in order to dis e evaluated as applicable to the particula	ive Plan, meet with the scuss the proposed amendment
Applican Note: It i. Gainesvill Departme und petition category of	s recommended that anyone in le Code of Ordinances (Land I nt of Community Development on process. The request will b on a citywide basis.	tending to file a petition for a text amend Development Code) or to the Comprehens prior to filing the petition, in order to dis	ive Plan, meet with the scuss the proposed amendment
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Section 30-64 Mixed Use low intensity district (Mul) zoning district an

districts to the "Correspondence of Zoning

Section 30-65 Mixed use medium intensity district (MV-2) zoning district to

add an exemption to the minimum density requirements. (2) Amend

ZONINA

Certified Cashiers Receipt:

Phone: 352-334-5022

With Future	Land Use Categories' table.
amendment, o the pre-applic	bmitting an application may rely upon any comment concerning a proposed or any expression of any nature about the proposal made by any participant at at ation conference as a representation or implication that the proposal will be proved or rejected in any form.
CERTIFICA	TION
The undersign herewith.	ned has read the above application and is familiar with the information submitted
Signature of ap	oplicant/agent: Krofa Lea
Date: _ 2 -	15-12

Phone: 352-334-5022