Wells County Area Plan Commission

Requirements for a Rezoning

Filing and Meeting dates are available at the Area Plan Commission Office and the Wells County Area Plan Commission Web Site (http://www.wellscounty.org/apc.htm)

Copies of the Wells County Zoning Ordinance and Wells County Subdivision Control Ordinance are available for purchase at the Wells County Area Plan Commission Office or may be viewed and printed online at the Wells County Area Plan Commission Web Site (http://www.wellscounty.org/apc.htm)

Contact Area Plan Office to customize petition based on number of parcels

1) FEES

a. Filing Fee: \$200.00 per parcel (Payable to Area Plan Commission)

(Filing fee set forth by the Wells County APC Fee Schedule)

b. Sign Fee: \$15.00 per parcel (Payable to Area Plan Commission)

(Public advertisement sign required by APC Rules of Procedure)

c. Legal Add: TBD based on number of parcels

(Payable to TBD by APC Office)

(Legal advertisement required by IC 5-3-1)

2) Filing

a. Filled Out and Signed Petition

- b. Current Deed for the affected properties
- c. Status of any applicable permits from other regulatory agencies
- d. Copy of Notice of Agriculture Activity Form (if property is or is to be zoned A-1 or A-R) *one needed for each property
- e. If petition is not signed by legal owner(s) then applicable Power of Attorney, Trust documents, and/or death certificate(s) are required.
- 3) APPEAL PERIOD: 30 DAYS

(State required appeal period set forth in IC 36-7-4)

- * All Fees Are Not Refundable
- * As A Petitioner You Are Responsible For Reviewing The Wells County Zoning Ordinance And Subdivision Control Ordinance Requirements For Your Petition. The Area Plan Commission Office Staff Will Be Available To Answer Any Questions You May Have.
- * A COMPLETE FILING DOES NOT GUARANTEE APPROVAL. (THE FILING MUST MEET THE APPLICABLE REQUIREMENTS OF THE WELLS COUNTY ZONING AND SUBDIVISION CONTROL ORDINANCE TO BE APPROVED.)

APC STAFF: Michael Lautzenheiser Jr. (Director); Suzie Gentis (Administrative Assistant);

Tracey Ulmer (Part-Time Clerical)

Power Plant Overlay District Rezoning Petition

Contact Area Plan Office to customize petition based on number of parcels

PETITION FOR REZONING AP	PROVAL: (APC OF	FICE)	
Lessee or Owner of Real Estat	e (Petitioner):		
Address:	City:	State:	Zip:
Phone #:	E-Mail:		
Property Location:			
Property Description:			
Current Zoning Classification:			
Proposed Overlay Classification	on:		
Comes now the Area Plan Co Rezoning makes the following		granting "Petitione	r's" Petition for
"Petitioner" filed a Petition fo	or a Rezoning as to the follow Township(s), Well:	_	
described on Exhibit A attach			, ,
The sign as required by the Pl of Procedure of the Plan Com hearing.		• •	
On, the in accordance with the Rules evidence was heard.			

^{**}See following pages for multiple properties.

Property #2 Lessee or Owner of Real Estate (Petitioner): Address: _____ City: ____ State: ____ Zip: _____ Phone #: E-Mail: Property Location: ____ Property Description: ____ Current Zoning Classification: Proposed Overlay Classification: ______ Property #3 Lessee or Owner of Real Estate (Petitioner): Address: ______ City: _____ State: ____ Zip: _____ Phone #: E-Mail: Property Location: Property Description: Current Zoning Classification: Proposed Overlay Classification: Property #4 Lessee or Owner of Real Estate (Petitioner): Address: ______ City: _____ State: ____ Zip: _____ Phone #: ______E-Mail: _____ Property Location: Property Description: Current Zoning Classification: _____ Proposed Overlay Classification: _____ Property #5 Lessee or Owner of Real Estate (Petitioner): Address: _____ City: ____ State: ____ Zip: ____ Phone #: ______E-Mail: _____ Property Location: Property Description: Current Zoning Classification: _____ Proposed Overlay Classification: _____

Property #6 Lessee or Owner of Real Estate (Petitioner): Address: ______ City: _____ State: ____ Zip: _____ Phone #: E-Mail: Property Location: Property Description: _____ Current Zoning Classification: _____ Proposed Overlay Classification: _____ Property #7 Lessee or Owner of Real Estate (Petitioner): Address: _____ City: ____ State: ____ Zip: ____ Phone #: _____E-Mail: _____ Property Location: Property Description: Current Zoning Classification: Proposed Overlay Classification: Property #8 Lessee or Owner of Real Estate (Petitioner): Address: ______ City: _____ State: ____ Zip: _____ Phone #: ______E-Mail: _____ Property Location: Property Description: Current Zoning Classification: _____ Proposed Overlay Classification: _____ Property #9 Lessee or Owner of Real Estate (Petitioner): Address: _____ City: ____ State: ____ Zip: ____ Phone #: ______E-Mail: _____ Property Location: Property Description: Current Zoning Classification: _____ Proposed Overlay Classification: _____

(Petitioner or Petitioner's Agent shall verify and explain why the petition meets each of the requirements listed below)

9-14 REQUIREMENTS:

a.	a. Does The Petition Meet the Requirement? (YES or NO) b. Explain				
character o	oposed Rezoning shall pay reasonable regard to current conditions and the of current structures and uses in each district. Does The Petition Meet the Requirement? (YES or NO) Explain				
for wh	oposed Rezoning shall pay reasonable regard to the most desirable use ich the land in each district is adapted. Does The Petition Meet the Requirement? (YES or NO) Explain				
proper a.	oposed Rezoning shall pay reasonable regard to the conservation of ty values throughout the jurisdiction. Does The Petition Meet the Requirement? (YES or NO) Explain				
and gro a.	oposed Rezoning shall pay reasonable regard to responsible development owth. Does The Petition Meet the Requirement? (YES or NO) Explain				

PETITIONER'S SIGNATURE:

Signature	Date	Signature	Date
Signature	Date	Signature	Date
Signature	Date	Signature	Date
Signature	Date	Signature	Date
Signature	Date	Signature	Date
Signature	Date	Signature	Date
Signature	Date	Signature	Date
Signature	Date	Signature	Date
Signature	Date	Signature	Date
(This petition must be signed by 50 or the trustee is filing this petition t Plan Commission)			
granted by a vote of	, the Pet in favor and	ition for a Rezoning by "Pet opposed.	
Granted thisday of		<u>-</u> ·	
Area Plan Commission Presid	 ent		
Area Plan Commission Secret	 ary		

NOTICE OF AGRICULTURAL ACTIVITY

TO: ALL PETITIONERS IN AGRICULTURAL ZONED AREAS OF WELLS COUNTY, INDIANA

This notice is given to you because of your petition to move into an area of **Wells** County that is zoned for Agriculture.

The purpose of this notice is to assure you are aware that all agricultural operations are allowed in this area.

Agricultural activity may include, but is not limited to, grazing of livestock, confined feeding of livestock, application of animal manure to land, application of herbicides and pesticides to fields and growing crops, creation of dust from field operations and noise from livestock and machinery operations which includes the drying and transportation of grain, sometimes with machinery that has a "Slow Moving Vehicle" emblem on it, meaning it is traveling at 25 mph or less.

People who choose to live in these areas must understand that agricultural operations may be occurring nearby.

You must also understand that Indiana has a "RIGHT TO FARM" law that protects farm operations from unwarranted nuisance suits by neighbors who move next to an existing farm operation. Farm operations do not constitute a nuisance so long as they are not negligently maintained, do not endanger human health and do not cause bodily injury to third parties.

By signing this notice form you verify that you have received it, read it and understand it. You are not giving up the right to seek redress for negligence by individuals associated with a farm operation or by other residents of the area.

l,	CERTIFY THAT I HAVE RECEIVED THIS NOTICE. I HAVE
READ IT AND I UNDERSTAND IT.	
Printed Name	_
Date	