



**Town of Smyrna**

**APPLICATION FOR REZONING**

Property Owner:

Applicant:

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Signature

Signature

Telephone No.: \_\_\_\_\_

Telephone No.: \_\_\_\_\_

Email: \_\_\_\_\_

Email: \_\_\_\_\_

Address of property for which rezoning is requested: \_\_\_\_\_

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Tax Map Parcel Number: \_\_\_\_\_

Present Zoning: \_\_\_\_\_ Requested Zoning: \_\_\_\_\_

Brief list of reasons why rezoning is required: \_\_\_\_\_

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**\*Any questions please contact Jeremy Rothwell by email  
jrothwell@smyrna.delaware.gov or by phone 302-389-2332.**

\*if review of this application is required by the Town of Smyrna engineer, the applicant is responsible for the incurred costs related to this review.

\*Rezoning application \$450 and \$25 for each additional acre

\*One (1) plot plan which shows all structures, improvements, metes and bounds and utilities must accompany this application.

\*Applicant and/or owner shall attend the public hearings to speak on behalf of the application or the application will be tabled.

----- **FOR OFFICE USE ONLY** -----

**Planning & Zoning Commission**

Meeting date: \_\_\_\_\_ Application received: \_\_\_\_\_

Fee paid/Receipt number: \$ \_\_\_\_\_

Public hearing advertised on: \_\_\_\_\_

Property posted on: \_\_\_\_\_

Notice sent to abutting property owners on: \_\_\_\_\_

**Recommendation by Planning & Zoning Commission:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Motion by: \_\_\_\_\_ Second by: \_\_\_\_\_

Vote: Yes ( ) No ( )

**Mayor and Council**

Meeting date: \_\_\_\_\_

Public hearing advertised on: \_\_\_\_\_

Property posted on: \_\_\_\_\_

Notice sent to abutting property owners on: \_\_\_\_\_

**Recommendation by Mayor and Council:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Motion by: \_\_\_\_\_ Second by: \_\_\_\_\_

Vote: Yes ( ) No ( )