



APPLICATION FOR ANNEXATION/ZONING CITY OF IONA

This application must be filled out in detail and submitted to the City Clerk's office at 3548 North Main Street, Iona, Idaho

1. Name of applicant: _____
2. Address of applicant: _____
3. Telephone number of applicant: _____ work; _____ home. _____
4. Address of subject property: _____
5. Legal description of property, (attach if necessary): _____

6. Is the applicant the owner of the subject property? If not, please state the name and address of the owner, together with the relationship of applicant to the owner: _____

7. Is a copy of one of the following attached? _ warranty deed; _ proof of option; _ earnest money agreement.
8. State the zoning desired for the subject property: _____
9. State the reason for the proposed annexation and any proposed plans for the use of the subject property: _____

Dated this _____ day of _____, 20__ Signature of applicant _____

This application will be referred to the Iona Planning and Zoning Commission for a recommendation on the requested zoning. The Planning and Zoning Commission shall hold a public hearing and will then make its recommendation to the City Council. The City Council will then hold a second public hearing. Notice of the public hearings must be published 15 days prior to said hearings. Notice shall also be posted on the premises of the subject property not less than 1 week prior to the hearings. Notices will also be mailed to property owners or purchasers of record within 300 feet of the subject property. You will be given notice of the public hearings and must be present to answer any questions.

APPLICATION ACCEPTED BY:	DATE:
APPLICATION FEE RECEIVED: \$	DATE:
NOTICE PUBLISHED: Date:	DATE OF HEARING:
SITE POSTED: Date:	
NOTICE TO RESIDENTS: Date:	
PERMIT APPROVED: () PERMIT DENIED: ()	NOTICE OF DECISION MAILED ON:
CONDITIONS IMPOSED:	RESIDENTS NOTIFIED:
ADDITIONAL SHEETS MAY BE USED AS NEEDED CITY OF IONA PLANNING & ZONING	