



West Point City  
3200 W 300 N  
West Point, UT 84015  
www.westpointcity.org  
Phone: 801-776-0970  
Fax: 801-525-9150

## APPLICATION FOR PROPERTY REZONING

APPLICATION DATE: \_\_\_\_\_ APPLICANT PHONE #: \_\_\_\_\_

APPLICANT NAME: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

PROPERTY OWNER(S)' SIGNATURE: \_\_\_\_\_

REZONE PROPERTY ADDRESS(ES): \_\_\_\_\_

REZONE PARCEL ID #(S): \_\_\_\_\_

LEGAL DESCRIPTION(S) (MAY ATTACH COPY): \_\_\_\_\_

CURRENT ZONING: \_\_\_\_\_ PROPOSED ZONING: \_\_\_\_\_

PURPOSE OF REZONE REQUEST: \_\_\_\_\_

AFFADAVIT: (SEE PAGE 2)

### FOR OFFICE USE

FEE FOR REQUEST: \$250 DATE PAID: \_\_\_\_\_

Check #: \_\_\_\_\_

Credit/Debit Card

Cash

PLANNING COMMISSION ACTION: \_\_\_\_\_ DATE: \_\_\_\_\_

CITY COUNCIL ACTION: \_\_\_\_\_ DATE: \_\_\_\_\_

**AFFIDAVIT**

**PROPERTY OWNER**

STATE OF UTAH )  
COUNTY OF \_\_\_\_\_ )

I/WE \_\_\_\_\_, BEING DULY SWORN, DEPOSE AND SAY THAT I/WE AM/ARE THE OWNER(S) OF THE PROPERTY IDENTIFIED IN APPLICATION AND THAT THE STATEMENTS HEREIN CONTAINED AND THE INFORMATION PROVIDED IDENTIFIED IN THE ATTACHED PLANS AND/OR OTHER EXHIBITS ARE IN ALL RESPECTS TRUE AND CORRECT TO THE BEST OF MY/OUR KNOWLEDGE. I/WE ALSO ACKNOWLEDGE THAT I/WE HAVE RECEIVED WRITTEN INSTRUCTIONS REGARDING THE PROCESS FOR WHICH I AM APPLYING AND WEST POINT CITY STAFF HAVE INDICATED THEY ARE AVAILABLE TO ASSIST ME/US IN MAKING THIS APPLICATION.

\_\_\_\_\_  
Signature of Property Owner

\_\_\_\_\_  
Signature of Property Owner

Subscribed and sworn to me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Notary Public

Residing in: \_\_\_\_\_

My Comission Expires: \_\_\_\_\_

**Agent Authorization**

I/WE \_\_\_\_\_, BEING DULY SWORN, DEPOSE AND SAY THAT I/WE AM/ARE THE OWNER(S) OF THE PROPERTY IDENTIFIED IN THE APPLICATION AND I/WE AUTHORIZE AS MY/OUR AGENT(S) \_\_\_\_\_ TO REPRESENT ME/US REGARDING THIS APPLICATION AND TO APPEAR ON MY/OUR BEHALF BEFORE ANY ADMINISTRATIVE OR LEGISLATIVE BODY IN WEST POINT CITY CONSIDERING THIS APPLICATION AND TO ACT IN ALL RESPECTS AS OUR AGENT IN MATTERS PERTAINING TO THE ATTACHED APPLICATION.

\_\_\_\_\_  
Signature of Property Owner

\_\_\_\_\_  
Signature of Property Owner

Subscribed and sworn to me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Notary Public

Residing in: \_\_\_\_\_

My Comission Expires: \_\_\_\_\_