



**Project Property Address:** \_\_\_\_\_

City Planning & Zoning Coordinator: Crystal R. Ball, CFM

Email- [cball@lovington.org](mailto:cball@lovington.org)

Phone: (575) 396-9301

## City Zoning Application

The following check list provides additional requirements for your specific application. Please attach all of the requested documentation, sign, and date.

### Zoning Requirements

- 1) Submit a completed Planning and Zoning Application. All fields must be completed and legible in order to process the application. This document provides the basic information required for all permitting applications.
- 2) Pay the appropriate zoning permit fee(s) \$ \_\_\_\_\_ Date paid \_\_\_\_\_.
- 3) Provide proof of ownership or interest in the property. A deed with a legal description or property lease will meet this requirement. If the applicant is not the owner, an Affidavit by Property Owner(s) is required.
- 4) Submit a site plan. Site plans must show the property lines, surrounding properties, proposed buildings/structures, lot area, lot dimensions, easements, building setbacks, road access points, and the location of utilities.
- 5) Submit a proposal letter that details the following: 
  - Proposed use
  - Reason(s) why the request is being made
  - Potential impacts (positive and negative) that may result from proposed use, including those related to noise, odors, traffic, health, quality of life, and property values
  - For Proposed Commercial Uses and Home Occupation Requests the letter should specify the type of business (retail, manufacturing, etc.), days and hours of operation, proposed number of employees, and the anticipated traffic/clientele
- 6) For annexations, the applicant must submit a petition signed by the owners of a majority of the number of acres in the contiguous territory.
- 7) Representation at two scheduled public hearings to present the request and answer questions, one before the Planning and Zoning Commission and a second with the City Commission.
- 8) A final inspection is required after the project is completed to ensure it conforms to the regulations set forth above. Contact Planning and Zoning at (575)396-9301 to set up this inspection.

Applicant Name: \_\_\_\_\_

Date: \_\_\_\_\_

Applicant Signature: \_\_\_\_\_

Notes or recommendations to applicant from Planning & Zoning or Code Enforcement.

**Preliminary Approval**

Planning, Zoning, Code Staff Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Preliminary Inspection**

Planning, Zoning, Code Staff Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Final Inspection**

Planning, Zoning, Code Staff Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_