



LAND USE PLAN AMENDMENT APPLICATION

CLARK COUNTY COMPREHENSIVE PLANNING DEPARTMENT

SEE SUBMITTAL REQUIREMENTS ON REVERSE FOR MORE INFORMATION

APPLICATION TYPE	STAFF	DATE FILED: _____	APP. NUMBER: _____
<input type="checkbox"/> LAND USE PLAN AMENDMENT (PA) <input type="checkbox"/> MAP <input type="checkbox"/> TEXT <input type="checkbox"/> TRANSPORTATION ELEMENT AMENDMENT (PA) <input type="checkbox"/> MAP <input type="checkbox"/> TEXT		PLANNER ASSIGNED: _____	TAB/CAC: _____
	PROPERTY OWNER	ACCEPTED BY: _____	TAB/CAC MTG DATE: _____ TIME: _____
		FEE: _____	PC MEETING DATE: _____
		CHECK #: _____	BCC MEETING DATE: _____
		COMMISSIONER: _____	ZONE / AE: _____
		OVERLAY(S)? _____	PLANNED LAND USE: _____
		TRAILS? Y / N	PUBLIC HEARING? _____ Y / N
		PFNA? Y / N	NOTIFICATION RADIUS: _____
		NAME: _____	
		ADDRESS: _____	
		CITY: _____	STATE: _____ ZIP: _____
		TELEPHONE: _____	CELL: _____
		E-MAIL: _____	

APPLICANT	NAME: _____
	ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____
	TELEPHONE: _____ CELL: _____
	E-MAIL: _____ REF CONTACT ID #: _____

CORRESPONDENT	NAME: _____
	ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____
	TELEPHONE: _____ CELL: _____
	E-MAIL: _____ REF CONTACT ID #: _____

ASSESSOR'S PARCEL NUMBER(S): _____

PROPERTY ADDRESS and/or CROSS STREETS: _____

PROJECT DESCRIPTION: _____

(I, We) the undersigned swear and say that (I am, We are) the owner(s) of record on the Tax Rolls of the property involved in this application, or (am, are) otherwise qualified to initiate this application under Clark County Code; that the information on the attached legal description, all plans, and drawings attached hereto, and all the statements and answers contained herein are in all respects true and correct to the best of my knowledge and belief, and the undersigned understands that this application must be complete and accurate before a hearing can be conducted. (I, We) also authorize the Clark County Comprehensive Planning Department, or its designee, to enter the premises and to install any required signs on said property for the purpose of advising the public of the proposed application.

Property Owner (Signature)*

Property Owner (Print)

STATE OF _____
 COUNTY OF _____

SUBSCRIBED AND SWORN BEFORE ME ON _____ (DATE)

By _____

NOTARY PUBLIC: _____

***NOTE:** Corporate declaration of authority (or equivalent), power of attorney, or signature documentation is required if the applicant and/or property owner is a corporation, partnership, trust, or provides signature in a representative capacity.

Submittal Requirements

<ul style="list-style-type: none"> Refer to Chapters 30.12 and 30.16.240 for more information Numbers represent the required copies These are the official submittal requirements of the Zoning Administrator, however additional requirements may apply Incomplete applications will not accepted All documents must be legible for reproduction 	Application ^A	Disclosure Form ^A	Project Description	Deed ^C	Written Consent from a Board Member	Justification Letter	Assessor's Map	Fees ^E
Land Use Plan Amendment ^D	1	1	1	1	1	1	1	✓
Transportation Element Amendment ^D	1	1	1		1			✓

FOOTNOTES:

- A. Forms available from the Comprehensive Planning Department online or in person.
- B. Available from the Assessor's Office online or in person.
- C. Most recent deed is required for each parcel included in the application. Deeds recorded 9/15/1999 to present are available from the Assessor's Office online. Deeds without a watermark or recorded prior to 9/15/1999 are available from the Recorder's Office in person or online for a fee.
- D. Appointment required. Call (702) 455-4972 or go online to schedule an appointment. Appointments to be requested with staff from Advanced Planning.
- E. See Chapter 30.80. Exact payment only. Staff can accept cash, check, and debit cards. Credit card and e-checks accepted online only. Checks payable to "Clark County" or "Comprehensive Planning." Additional notice fees may be required after submittal.

CLARK COUNTY COMPREHENSIVE PLANNING
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www.ClarkCountyNV.gov