



# COCHISE COUNTY COMMUNITY DEVELOPMENT

"Public Programs...Personal Service"

COCHISE COUNTY

MAR 10 2014

## COCHISE COUNTY REZONING APPLICATION

PLANNING

Submit to: Cochise County Community Development Department  
1415 Melody Lane, Building E, Bisbee, Arizona 85603

1. Applicant's Name: Ian M. Dorofey

2. Mailing Address: P.O. Box 223

McNeal AZ 85617

City State Zip Code

3. Telephone Number of Applicant: (520) 234-7603

4. Telephone Number of Contact Person if Different: ( )

5. Email Address: idorofey@hotmail.com

6. Assessor's Tax Parcel Number: 404 - 02 - 302 (Can be obtained from your County property tax statement)

7. Applicant is (check one):

- Sole owner:  \_\_\_\_\_
- Joint Owner: \_\_\_\_\_ (See number 8)
- Designated Agent of Owner: \_\_\_\_\_
- If not one of the above, explain interest in rezoning: \_\_\_\_\_

7. If applicant is **not** sole owner, attach a list of all owners of property proposed for rezoning by parcel number. Include all real parties in interest, such as beneficiaries of trusts, and specify if owner is an individual, a partnership, or a corporation:

- List attached (if applicable): \_\_\_\_\_

8. If applicant is **not** sole owner, indicate which **notarized** proof of agency is attached:

- If corporation, corporate resolution designating applicant to act as agent: \_\_\_\_\_
- If partnership, written authorization from partner: \_\_\_\_\_
- If designated agent, attach a **notarized** letter from the property owner(s) authorizing representation as agent for this application.

9. Attach a proof of ownership for all property proposed for rezoning. Check which proof of ownership is attached:

- Copy of deed of ownership: \_\_\_\_\_
- Copy of title report: \_\_\_\_\_
- Copy of tax notice: \_\_\_\_\_
- Other, list: \_\_\_\_\_

10. Will approval of the rezoning result in more than one zoning district on any tax parcel?

- Yes \_\_\_\_\_ No

11. If property is a new split, or the rezoning request results in more than one zoning district on any tax parcel then a copy of a survey and associated legal description stamped by a surveyor or engineer licensed by the State of Arizona must be attached.

12. Is more than one parcel contained within the area to be rezoned? Yes \_\_\_\_\_ No

- If yes and more than one property owner is involved, have all property owners sign the attached consent signature form.

13. Indicate existing Zoning District for Property: RU 2

14. Indicate proposed Zoning District for Property: RU 4

**Note: A copy of the criteria used to determine if there is a presumption in favor of or against this rezoning is attached. Review this criteria and supply all information that applies to your rezoning. Feel free to call the Planning Department with questions regarding what information is applicable.**

15. Comprehensive Plan Category: D (A County planner can provide this information.)

16. Comprehensive Plan Designation or Community Plan: rural (A County planner can provide this information.)

**Note: in some instances a Plan Amendment might be required before the rezoning can be processed. Reference the attached rezoning criteria, Section A.**

17. Describe all structures already existing on the property: Shack

18. List all proposed uses and structures which would be established if the zoning change is approved. Be complete. Please attach a site plan: \_\_\_\_\_

19. Are there any deed restrictions or private covenants in effect for this property?

- No  Yes \_\_\_\_\_
- If yes, is the proposed zoning district compatible with all applicable deed restrictions/private covenants? Yes \_\_\_\_\_ No \_\_\_\_\_
- Provide a copy of the applicable restrictions (these can be obtained from the Recorder's office using the recordation Docket number)

20. Which streets or easements will be used for traffic entering and exiting the property?

E. E. Ranch

21. What off-site improvements are proposed for streets or easements used by traffic that will be generated by this rezoning? None

22. How many driveway cuts do you propose to the streets or easements used by traffic that will be generated by this rezoning? 1

23. Identify how the following services will be provided:

Service	Utility Company/Service Provider	Provisions to be made
Water		off grid
Sewer/Septic		off grid
Electricity		off grid
Natural Gas		off grid
Telephone		off grid
Fire Protection		off grid

24. This section provides an opportunity for you to explain the reasons why you consider the rezoning to be appropriate at this location. The attached copy of the criteria used to determine if there is a presumption in favor of or against this rezoning is attached for your reference (attach additional pages as needed).

Facilitate Opt-out building

---

---

---

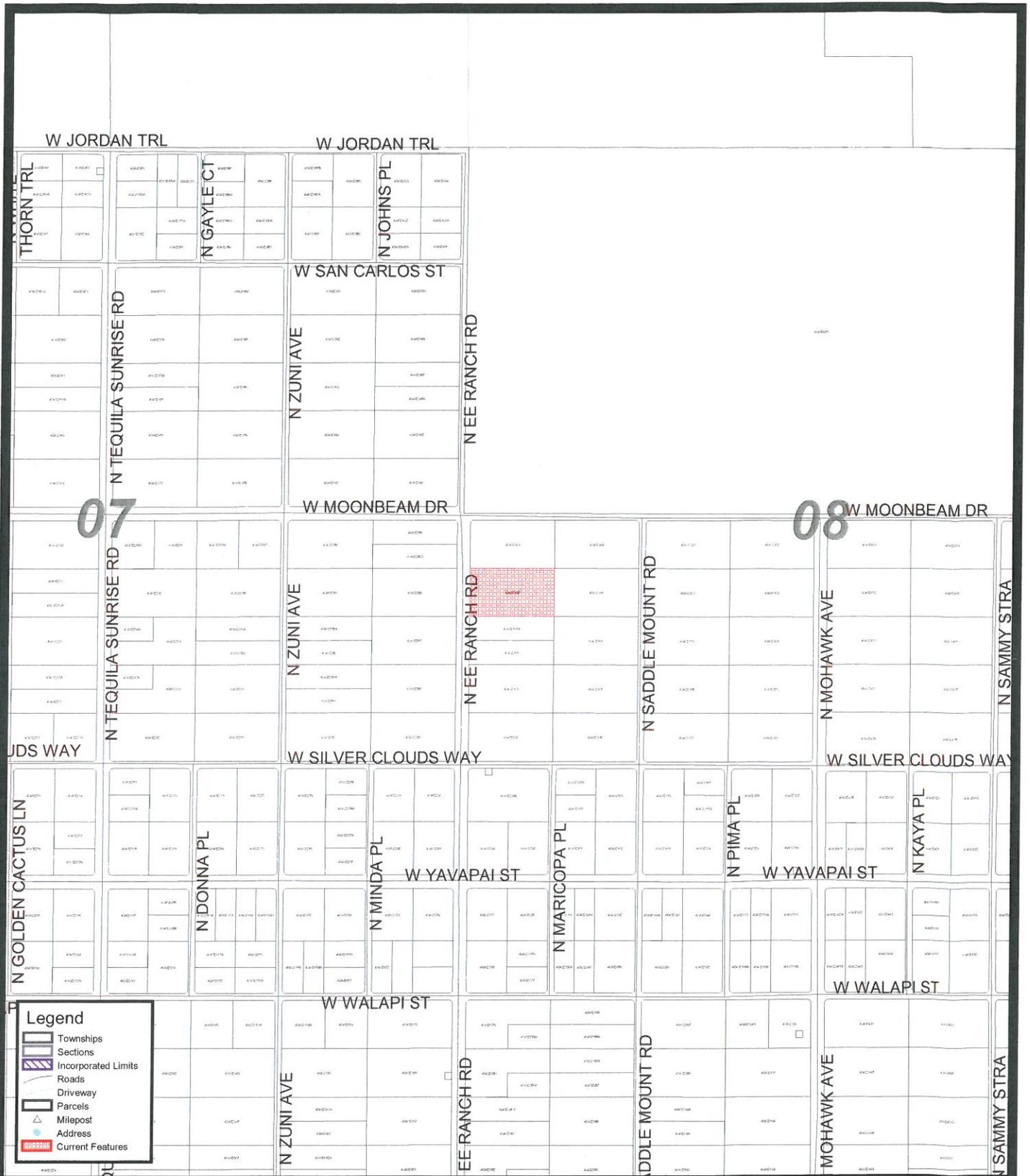
---

25. AFFIDAVIT

I, the undersigned, do hereby file with the Cochise County Planning Commission this petition for rezoning. I certify that, to the best of my knowledge, all the information submitted herein and in the attachments is correct. I hereby authorize the Cochise County Planning Department staff to enter the property herein described for the purpose of conducting a field visit.

Applicant's Signature:     *Sam M. Dorey*    

Date:     3-10-14



Z-14-04 (Dorofey)

B

This map is a product of the Cochise County GIS Information Technology Dept.





0' 1" = 1000'

22