



TOWN OF CLAYTON
 Planning Department
 111 E. Second St., P.O. Box 879
 Clayton, NC 27528
 Phone: 919-553-5002
 Fax: 919-553-1720

ORDINANCE AMENDMENT APPLICATION

Pursuant to Article 7, Section 155.703 of the Unified Development Code, the Town Council, Board of Adjustment, Planning Board, Planning Director, or the general public may petition the Town Council to amend the Code of Ordinances.

Application Fee: TBD
Advertisement Fee: \$100.00
All fees are due when the application is submitted.

AMENDMENT INFORMATION

Project Name: _____
Existing title of Code Section(s): _____
Code Section Number(s): _____

APPLICANT/CONTACT INFORMATION

Applicant: _____
Mailing Address: _____
Phone Number: _____ **Fax:** _____
Contact Person: _____
Email Address: _____

DESCRIPTION OF REQUESTED CHANGES

Please provide a general justification of the requested ordinance amendment. Attach additional sheets if necessary.

FOR OFFICE USE ONLY

Date Received: _____ Amount Paid: _____ File Number: _____

REQUIRED INFORMATION (to be submitted with the application)

The following items must accompany this application for it to be deemed complete.

To be completed by the applicant:			For staff use only:		
<i>Submit 9 copies of all materials unless otherwise noted or directed by staff</i>	Yes	N/A	Yes	No	N/A
1. A pre-application conference was held with Town of Clayton staff. Date: _____	<input type="checkbox"/>				
2. Review Fee and Advertisement Fee	<input type="checkbox"/>				
3. Completed application	<input type="checkbox"/>				
4. A bound strikethrough/underline copy of the Code section(s) proposed for revision	<input type="checkbox"/>				
5. A bound "clean" copy of the Code section(s) proposed for revision	<input type="checkbox"/>				

APPROVAL CRITERIA

All applications for Ordinance Amendment must address the following criteria:

1. The extent to which the proposed text amendment is consistent with the remainder of the chapter, including specifically, any purpose and intent statements.

2. The extent to which the proposed text amendment represents a new idea not considered in the existing chapter, or represents a revision necessitated by changing circumstances over time.

3. Whether or not the proposed text amendment corrects an error in the chapter.

4. Whether or not the proposed text amendment revises the chapter to comply with state or federal statutes or case law.

APPLICANT AFFIDAVIT

I/We, the undersigned, do hereby make application and petition to the Town Council of the Town of Clayton to amend the Code of Ordinances as requested. I hereby certify that I have full legal right to request such action and that the statements or information made in any paper or plans submitted herewith are true and correct to the best of my knowledge. I understand this application, related material and all attachments become official records of the Planning Department of the Town of Clayton, North Carolina, and will not be returned.

Print Name

Signature of Applicant

Date