



LAKE HAVASU CITY

General Plan Amendment Application

Submit completed application to the Development Services Department / Planning Division:
2330 McCulloch Blvd N. / Lake Havasu City, AZ 86403 or planninginfo@lhcaz.gov

For specific regulatory procedures, see Lake Havasu City Code Sections 14.05.04(M).

APPLICATION NUMBER _____ DATE _____

(1) OWNER NAME/MAILING ADDRESS/CONTACT INFO

PHONE _____
EMAIL _____

(2) APPLICANT NAME/MAILING ADDRESS/CONTACT INFO (if different than Owner)

PHONE _____
EMAIL _____

(3) SITE LOCATION

STREET ADDRESS _____
ASSESSOR PARCEL ID _____ TRACT _____ BLOCK _____ LOT _____

(4) PROJECT INFORMATION

Amendment Description: _____

Present GP Designation _____ Proposed GP Designation _____ Lot(s) Size _____

(5) SUBMITTAL REQUIREMENTS

- a) Property owner list from the Mohave County GIS website of property owners within 300 feet of subject property
www.mohavecounty.us
- b) Citizen's Review Report*
 - i) Copy of meeting invitation letter
 - ii) List of attendees
 - iii) Notes/minutes

*The applicant must conduct a meeting at the location of their choice prior to the submittal of a General Plan Amendment Application to the City. Letters must be sent to property owners within 300 feet of the proposed amendment inviting them to the meeting. There is no restriction to the time or location of the meeting. The applicant shall explain, in detail, the request and take notes as to the questions from the attendees. The attendance and notes from the meeting shall accompany this Application to the City. The intent of the meeting is to conform with the Arizona State Growing Smarter legislation by involving citizens early in the process and alerting them to any potential impacts of the proposed amendment.

- c) Two (2) ea. 8-1/2" x 11" Proposed Land Use Map
- d) Two (2) ea. 24" x 36" Proposed Land Use Map
- e) Narrative Statement or a description of the proposed change
- f) Legal description of property
- g) Two (2) ea. 8-1/2" x 11" Location Map of subject area
- h) Major amendment applications must be submitted between January 1 and February 15 of each year

(6) APPLICATION PROCESSING TIMEFRAME & FEES

- a) Staff reviews submittal requirements for completeness and compliance with the Lake Havasu City Code (3 business days).
- b) Staff contacts applicant for payment of fee (3 business days). Fees can be paid by credit card, check, or cash.
- c) Staff performs internal review (10 business days).
- d) The request will be scheduled for the next available Planning and Zoning Commission meeting (Minor - up to 45 days) (Major - between March and September).
- e) The request will be scheduled for the next available City Council meeting (Minor-up to 45 days) (Major-prior to October 1).
- f) If City Council adopts the amendment by ordinance, it is certified by the City Clerk's office (3 business days).
- g) If adopted, the ordinance is effective thirty (30) days after adoption.

Major General Plan Amendment* Fee: **\$4,808.36** **Minor Amendment/Specific Plan Fee:** **\$2,270.03**

*Major General Plan Amendments as defined by Code Section 14.05.04(M) and in compliance with ARS § 9-461.06 shall be considered once each year. City Council must review all amendments by October 1 of each year. Major amendments require a 2/3 majority vote by City Council.

(7) CONTACT PLANNING FOR FURTHER INFORMATION

Luke Morris, City Planner (928) 854-0722 morrisl@lhcaz.gov
Stuart Schmeling, Development Services Director (928) 854-0714 schmelings@lhcaz.gov

(8) CLARIFICATION

A person may request the City to clarify its interpretation or application of a statute, ordinance, code, or policy affecting the processing of this application in accordance with ARS § 9-839.

(9) CERTIFICATION/ACKNOWLEDGEMENT

- a) I hereby file the above request as an authorized applicant.
- b) To the best of my knowledge, the information provided herein is accurate and true.
- c) I am aware of the steps and timeframes involved in the processing of this application.

To submit this application electronically, Lake Havasu City requires that you certify your application by submitting an electronic signature. Please type your name in the field below and click the confirm signature check box.

SIGNATURE _____

DATE _____

CONFIRM SIGNATURE