



Cochise County
Community Development
 Planning, Zoning and Building Safety Division

Public Programs...Personal Service
 www.cochise.az.gov

COCHISE COUNTY REZONING APPLICATION

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

1. Applicant's Name: Jonathan & Ashley Longnecker

2. Mailing Address: 4304 Mascarene Rd

<u>Knoxville</u>	<u>TN</u>	<u>37921</u>
City	State	Zip Code

3. Telephone Number of Applicant: Jonathan 865-607-4756 Ashley 865-437-6430

4. Telephone Number of Contact Person if Different: _____

5. Email Address: hello @ tiny shiny home . com

6. Assessor's Tax Parcel Number: 117 - 06 - 231A (Can be obtained from your County property tax statement)
117 - 06 - 237A

7. Applicant is (check one):
- Sole owner: _____
 - Joint Owner: _____ (See number 8)
 - Designated Agent of Owner: X _____
 - 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:

Planning, Zoning and Building Safety
 1415 Melody Lane, Building E
 Bisbee, Arizona 85603
 520-432-9300
 520-432-9278 fax
 1-877-777-7958
 planningandzoning@cochise.az.gov

Highway and Floodplain
 1415 Melody Lane, Building F
 Bisbee, Arizona 85603
 520-432-9300
 520-432-9337 fax
 1-800-752-3745
 highway@cochise.az.gov
 floodplain@cochise.az.gov

- 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 X

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 X 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: SR-43

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.

D-Med. Den. Res.

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

16. Comprehensive Plan Designation or Community Plan: MSSCP (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: NONE

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

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

- No _____ Yes X
- If yes, is the proposed zoning district compatible with all applicable deed restrictions/private covenants? Yes X 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?

Desert Rd Pearce Rd

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? 2

23. Identify how the following services will be provided:

Service	Utility Company/Service Provider	Provisions to be made
Water	haul / well	
Sewer/Septic	septic	
Electricity	solar	
Natural Gas	propane /	
Telephone	/	
Fire Protection	sunsites fire	

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).

opt out / so our land won't be ^{sub}divided / so we
have extra room/space / SR-43 is not appropriate.
owner-builder opt out option

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: Donkey Longmeyer [Signature]

Date: Jan. 21, 2020 1/21/20

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT

CIVIL CODE § 1189

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California)

County of SAN DIEGO)

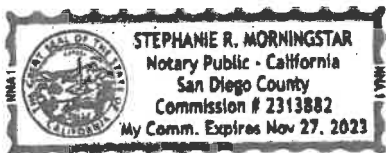
On 16 JAN 2020 before me, Stephanie R. Morningstar Notary Public
Date Here Insert Name and Title of the Officer

personally appeared RICHARD TRESTRAIL / CHERYL TRESTRAIL
Name(s) of Signer(s)

who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument:

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.



Signature Stephanie R Morningstar
Signature of Notary Public

Place Notary Seal Above

OPTIONAL

Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.

Description of Attached Document

Title or Type of Document: _____ Document Date: _____

Number of Pages: _____ Signer(s) Other Than Named Above: _____

Capacity(ies) Claimed by Signer(s)

Signer's Name: _____

Corporate Officer — Title(s): _____

Partner — Limited General

Individual : Attorney in Fact

Trustee : Guardian or Conservator

Other: _____

Signer Is Representing: _____

Signer's Name: _____

Corporate Officer — Title(s): _____

Partner — Limited General

Individual Attorney in Fact

Trustee Guardian or Conservator

Other: _____

Signer Is Representing: _____

Zoning and Planning Department of Cochise County

This letter is to allow Jonathan and Ashley Longnecker to attempt to re-zone 11 acres in Pearce, AZ.

117-06-231A
117-06-237A

This property belongs to Richard and Cheryl Trestrail, and we give permission to Jonathan and Ashley Longnecker to submit all forms and pay the fee for the re-zoning process.



Owner, Richard Trestrail



Owner, Cheryl Trestrail

1-16-20
Date

SEE ATTACHED DOCUMENT FOR OFFICIAL NOTARY

Notary