



Cochise County
Community Development
 Planning, Zoning and Building Safety Division
Public Programs...Personal Service
 www.cochise.az.gov

COCHISE COUNTY

SEP 03 2020

PLANNING

COCHISE COUNTY REZONING APPLICATION

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

1. Applicant's Name: Rick & Sharilyn ANDASOLA

2. Mailing Address: 20524 Highway 140

HESPERUS CO 81326
 City State Zip Code

3. Telephone Number of Applicant: 970-403-9797
970-769-2065

4. Telephone Number of Contact Person if Different: _____

5. Email Address: SharingTime59@gmail.com

6. Assessor's Tax Parcel Number: 119 - 02 - 214B (Can be obtained from your County property tax statement)

7. Applicant is (check one):

- Sole owner: X
- 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:

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: X
- 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 _____ No X

- 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: SR-174

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: _____ (A County planner can provide this information.)

16. Comprehensive Plan Designation or Community Plan: _____ (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: Context Box used for Storage of Tools to maintain the property, Rakes, Lawn mowers, Shovels

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 X 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?

Kevin and or James

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 ONE

23. Identify how the following services will be provided:

Service	Utility Company/Service Provider	Provisions to be made
Water		
Sewer/Septic	<u>Septic</u>	
Electricity	<u>Sulfer Springs</u>	
Natural Gas		
Telephone		
Fire Protection		

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).

We have cleared years of tumbleweed and pack rat habitat
We have completed fire mitigation by trimming dead vegetation & TRASH
from the property. At the moment we have a house &
property in Colorado we are trying to sale. When that happens
we will have the resources to build on this property.

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: Sharilyn R. Andruska

Date: _____

Aug 23, 2020

KELVIN

DRIVE WAY

SEPTIC

← 40 FT →

CONEX Box

↑ 30 FT ↓

WICHITA SIKONGTUWU

JAMES

WEST

← 1

