

epartment of

## **REZONE APPLICATION**

<u>PROJECT INFORMATION</u>
Current Zoning
Zaning Proposed
Zoning Proposed
Zoning of surrounding parcels
Zonnig or surrounding purceis
State the reason(s) for the Rezone Request
Intended land use
For Official Use Only
PLN Fee \$ Accepted By
Fee Rate \$
File No
Rezone No(s)
· · · · · · · · · · · · · · · · · · ·

P.O. Box 113 Grand Cayman *KY1-9000* Cayman Islands

I hereby certify that the information provided is accurate, true and complete.	
Signature	
QUALIFICATIONS FOR REVIEW *  □ Three (3) copies of the Site/Location plan short zoned outlined in red. This plan can be a copt Scale 1:2,500 or 1:5,000 and less than 60 dayter the applicant is encouraged to submit a cover	by of the Registry Map, vs old.

- sons for requesting an amendment to the Development Plan ☐ The applicant is encouraged to submit concept drawings illustrating
  - intentions.
- ☐ Registry Map & Land Register (less than 60 days old)
- ☐ Application Fee
  - \*Note supplying these requirements does not guarantee approval \*

Date Stamp

Planning Fee Paid Stamp