



*For Planning Department Use Only*  
 Date Received:  
 PC Case Number:  
 Planner:  
 DRC Date:

## Text Amendment Checklist

The following information shall be included as part of a text amendment application when submitting to the Planning Division. Please include a copy of this checklist when submitting your application.

<b>Project Name:</b>	
<b>Address/Location:</b>	
<b>Property Owner(s):</b>	
<b>Applicant:</b>	

\* denotes mandatory item for application to be considered complete. All other items are as applicable.

	Item Description	Provided (✓)	Applicant comments <i>(attach sheet for additional comments)</i>
<b>Submittal Requirements</b>			
*	Complete application with related fees and agent authorization form.		
*	Digital submission of application. Acceptable formats include pdfs, CD, or USB drive. Please send pdfs to <a href="mailto:DRCDigital@cityoffrederickmd.gov">DRCDigital@cityoffrederickmd.gov</a>		
*	Comprehensive Land Use Map of subject areas impacted by text amendment change		
*	Current Zoning Map of properties impacted by requested text amendment change		
*	Provide LBCS or NAICS codes for similar uses		
*	Justification statement addressing how the changes implement the policies of the comprehensive plan and how they are consistent with existing regulations.		
*	Draft amendments showing existing and proposed language using brackets to indicate text that is being deleted and underlining text which is to be added.		