



Department of Planning and Zoning

DPZ Office Use only:
Case No _____
Date Filed _____

Administrative Adjustment to the District Map Line
For Drafting Errors and Other Corrections

1. Proposed District Map Line Adjustment

a. Describe the lot line, road, river or other clear boundary the district map line approximately follows:

b. Describe the drafting errors, the corrected base map information, or other improved information which are evidence of the reason(s) the district map line does not currently follow the lot line or boundary noted above:

2. Petitioner's Name _____

Address _____

Phone No. _____ (W) _____ (H) _____

Email Address _____

3. Counsel for Petitioner _____

Counsel's Phone No. _____

Email Address _____

4. Property Identification

Address of Subject Property _____

Total Acreage of Property _____

Property Location _____

Election District _____ Zoning District _____ Tax Map # _____

Block # _____ Parcel/Lot # _____

Subdivision Name (if applicable) _____

5. Petitioner's Interest in Subject Property

Owner (including joint ownership) Other (describe and give name and address of owner)

If the Petitioner is not the owner of the subject property, documentation from the owner authorizing the petition must accompany this petition.

7. Administrative Adjustment Plan

All plans must be folded to approximately 8 ½ x 14 inches. The plan must be drawn to scale and must include the items listed below:

- (a) Courses and distances of property lines
- (b) Size of property
- (c) North arrow
- (d) Scale of plan
- (e) Zoning of subject property and adjoining properties
- (f) Tax map, parcel and lot number of subject property
- (g) Existing and proposed zoning district map lines
- (h) The lot line, road, river or other boundary noted in 5.a. above
- (i) Existing uses, structures, and natural features
- (j) Any other information as may be necessary for full and proper consideration of the petition.

8. Materials, Fees, Posting and Advertising

- a. **Original and two (2) copies of this petition**, all supplemental pages or reports, and the required plans must be submitted.
- b. The undersigned agrees to pay all costs in accordance with the current schedule of fees. **The fee is \$615.00 plus \$25.00 for a poster.** The undersigned also agrees to properly post the property at least 15 days immediately prior to the hearing, to maintain the posters as required, and to submit an affidavit of posting at the time of the hearing.

9. Signatures

The undersigned hereby affirms that all of the statements and information contained in, or filed with, this petition are true and correct.

The undersigned has read the instructions on this form, filing herewith all of the required accompanying information.

Signature of Petitioner

Signature of Attorney

For DPZ office use only:

Hearing fee: \$ _____
Poster fee: \$ _____
Total: \$ _____
Receipt No. _____

(Make checks payable to the "Director of Finance")

County Website: www.howardcountymd.gov

NOTE: No appointment is needed to submit this application and payment of fees is not due until a hearing date is set and you are notified.

Revised: 7/12

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