



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.

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

* 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>
Submittal Requirements			
*	Complete application with related fees and agent authorization form.		
*	The completed application form, supporting plans and other documentation in PDF form ONLY must be sent to DRCdigital@cityoffrederickmd.gov .		
*	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.		