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**PLANNING AND CODE ADMINISTRATION**

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**ZONING MAP AMENDMENT APPLICATION**

*All information must be complete to initiate processing of application*

**SUBJECT PROPERTY**

Street Address or Location \_\_\_\_\_

**APPLICANT/BILLING CONTACT**

Business Name \_\_\_\_\_

Primary Contact \_\_\_\_\_

Street Address \_\_\_\_\_ Suite No. \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Telephone Numbers: Work \_\_\_\_\_ Cell \_\_\_\_\_ E-mail Address \_\_\_\_\_

**OWNER**

Business Name \_\_\_\_\_

Primary Contact \_\_\_\_\_

Street Address \_\_\_\_\_ Suite No. \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Telephone Numbers: Work \_\_\_\_\_ Cell \_\_\_\_\_ E-mail Address \_\_\_\_\_

**DEVELOPER**

Business Name \_\_\_\_\_

Primary Contact \_\_\_\_\_

Street Address \_\_\_\_\_ Suite No. \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Telephone Numbers: Work \_\_\_\_\_ Cell \_\_\_\_\_ E-mail Address \_\_\_\_\_

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**AMENDMENT METHOD: (complete information for only one method)**

**Standard Re-Zoning Method**

Existing Zone \_\_\_\_\_ Proposed Zone \_\_\_\_\_ Number of Acres to Re-Zone \_\_\_\_\_

**Standard Re-Zoning Optional Method**

Existing Zone \_\_\_\_\_ Proposed Zone \_\_\_\_\_

**SITE DETAILS:**

Site Area Sq. Ft.	_____	Commercial Sq. Ft.	_____	Number of Dwelling Units/Lot	_____
Site Area Acres	_____	Industrial Sq. Ft.	_____	Number of Dwelling Units/Acre	_____
Green Area Sq. Ft.	_____			Height of Tallest Building (Ft.)	_____
Green Area %	_____			Height of Tallest Building (Stories)	_____

**MXD with Sketch Plan Method**

Site Plan to Amend \_\_\_\_\_

Existing Zone \_\_\_\_\_ Proposed Zone \_\_\_\_\_

**SITE DETAILS:**

	Maximum	Minimum		Maximum	Minimum
Site Area Sq. Ft.	_____	_____	Number of Dwelling Units/Lot	_____	_____
Site Area Acres	_____	_____	Number of Dwelling Units/Acre	_____	_____
Green Area Sq. Ft.	_____	_____	Height of Tallest Building (Ft.)	_____	_____
Green Area %	_____	_____	Height of Tallest Building (Stories)	_____	_____
Commercial Sq. Ft.	_____	_____			
Institutional Sq. Ft.	_____	_____			

**PROJECT DESCRIPTION**

See Next Page for Submission Requirements

**THIS CHECKLIST IS A GENERAL GUIDE FOR ITEMS THAT ARE TYPICALLY REQUIRED FOR APPLICATIONS. PLEASE REFER TO CHAPTER 24, SECTION 196 (c) OF THE CITY CODE FOR COMPLETE REQUIREMENTS OR CONTACT PLANNING STAFF AT 301-258-6330 FOR FURTHER CLARIFICATION.**

### **SUBMISSION REQUIREMENTS**

- **Map or Plat, Five (5) hard copies, One (1) digital (DWF preferred) or PDF**
- **Legal Metes and Bounds, One (1) digital copy, PDF**
- **List of Affected Property Owners with Addresses, One (1) digital copy, PDF**
- **Applicant Statement**

### **If Optional Method Also Submit:**

- **Site, Architectural and Detail Plan, Five (5) hard copies, One (1) digital copy (DWF preferred) or PDF**
- **Preliminary Affordable Housing Plan**
- **Preliminary Stormwater Management Plans, Three (3) hard copies, One (1) digital copy (DWF preferred) or PDF**
- **Preliminary Traffic Impact Study**
- **Other Planning Commission Requested Material**

### **If MXD Zone Also Submit:**

- **Site, Architectural and Detail Plan, Five (5) hard copies, One (1) digital copy (DWF preferred) or PDF**
- **Concept Stormwater Management Plans, One (1) hard copy, One (1) digital copy (DWF preferred) or PDF**
- **Approved NRI and FSD Plans, One (1) hard copy, One (1) digital copy (DWF preferred) or PDF**
- **Proof of Compliance with MXD Regulations**
- **Other Planning Commission Requested Material**