Attachment B

City of Council Bluffs, Iowa
209 Pearl Street
Council Bluffs, Iowa 51503
Phone: 712-328-4629 Fax: 712-328-4915

REZONING APPLICATION

A. General information

1. Applicant:
   Name: Authier Properties, LLC by: Jerry and Karen Authier - AND - Grant and Cheryl Wakefield
   Address: 1808 Skyline Drive
   City/State/Zip: Elkhorn, NE 68022
   Phone/Fax/E-Mail Address: 402.669.8573 (Jerry) / 712.209.4746 (Grant)
   Status: Property Owner X Legal Option Holder ____ Contract Purchaser ____ Auth Agent ____

2. Property Owner: (If not the same as applicant above)
   Name: ____
   Address: ____
   City/State/Zip: ____
   Phone/Fax/E-Mail Address: ____

3. Represented by:
   Name: Self Representation and John H. Jerkovich of Heartland Properties, Inc
   Address: 535 W. Broadway, Suite 100
   City/State/Zip: Council Bluffs, IA 51503
   Phone/Fax/E-Mail Address: 712.388.2212
   Status: Property Owner X Legal Option Holder ____ Contract Purchaser ____ Auth Agent X

- An application may be filed only by the owner(s) of the property or by a person authorized by the owner. Proof of that authorization must accompany the application.
- If more than one property owner is involved, please attach additional names and addresses to this application.
- I certify that the information presented with this application is true and correct to the best of my knowledge.

Signature	Print Name	Address
	Grant Wakefield Cheryl Wakefield	3611 California St Omaha 68131
	Jerry Authier	1808 Skyline Dr Elkhorn, NE
Signature	Print Name Karen Authier	Address

Please note that your application will not be accepted or there may be a delay in processing by the Community Development Department if any of the required information or materials are missing or improperly presented. In order to ensure that a complete application is provided and to avoid unnecessary delays in processing, please submit all required materials, i.e. signed application, fees, exhibits and/or site plans, special studies if applicable. If you have any questions regarding this application or required materials, please contact the Community Development Department at (712) 328-4629 between 8:00 a.m. and noon or between 1:00 p.m and 5:00 p.m., Monday through Friday.

B. Project Information:

1. Address or location of proposed rezoning: Council Pointe Road (North of house #5003)
   Legal Description: (attach survey if necessary) See attached.
2. Land Area: 0.73 (acres)
3. Current Zoning Designation: A-2
4. Requested Zoning Designation: R-1
5. Current Land Use: Golf Course
6. Proposed Land Use: Single-Family Residential
7. Reason(s) for Rezoning Request: Development of lots.
8. Attach Legal Description of Property and Survey (if requested).
9. Attach list of Property Owners/Contract Purchasers located within 200 feet of requested rezoning. This list must include owner's name, property address, billing address and legal description.
10. Attach site plan and/or other documents that illustrate this request.
11. Include nonrefundable filing fee: $200.
    Please make check made payable to the Council Bluffs City Clerk.

For Office Use Only

Case Number: _____

Planning Commission: _____
Published: _____
Action: _____

Date Complete Application Received: _____

City Council: _____
Published: _____

Action: _____

Future Land Use Designation (Comprehensive Plan) _____
Land Use Designation amendment needed: _____

Associated Case Numbers: _____

Check Number/Amount: _____

Other Comment(s): _____

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SUBDIVISION APPLICATION
( ) **PRELIMINARY PLAN***
(X) **FINAL PLAT**
( ) **MAJOR SUBDIVISION**
(x) **MINOR SUBDIVISION***
( ) **REPLAT ***

*A pre-application meeting is required prior to submittal

A. General information

1. Applicant:
   Name: Western Iowa Land Development, LLC c/o John Jerkovich & Bob McCarthy
   Address: PO Box 683
   City/State/Zip: Avoca, IA 51521
   Phone/Fax/E-Mail Address: 712.325.0445
   Status: Property Owner _____ Legal Option Holder ____ Contract Purchaser ____ Auth Agent x

2. Property Owner: (If not the same as applicant above)
   Name: Authier Properties, LLC by Jerry and Karen Authier - AND - Grant and Cheryl Wakefield
   Address: 1808 Skyline Drive
   City/State/Zip: Elkhorn, NE 68022
   Phone/Fax/E-Mail Address: 402.669.8573 (Jerry) / 712.209.4746 (Grant)

3. Engineer/Surveyor or Architect:
   Name: HGM Associates, Inc Contact: David Forsythe
   Address: 640 5th Avenue
   City/State/Zip: Council Bluffs, IA 51501
   Phone/Fax/E-Mail Address: 712.323.0530

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- If more than one property owner is involved, please attach additional names and addresses to this application.
- I certify that the information presented with this application is true and correct to the best of my knowledge.

Signature | Grant Wakefield/Cheryl Wakefield | 3511 California St Omaha 68131
Signature | Jerry Authier | 1808 Skyline Dr. Elkhorn Ne 68022
Signature | Karen Authier

Print Name | Address

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B. Project Information: See Subdivision - Title 14 of the Municipal Code for specific requirements

1. Subdivision Name: Fox Run Landing Replat Four
2. Address or location of proposed subdivision: Council Pointe Road (North of house #5003)
3. Legal Description: (attach survey if necessary) See attached.
4. Land Area: 0.73 (acres)
5. Zoning: Current: A-2 Proposed: R-1
6. Land Use: Current: Golf Course Proposed: Single-Family Residential
7. Attach Letter of Intent describing specifically the improvements proposed to serve the subdivision and any variances being sought and the related hardship.
8. Legal Description of Property and Survey on platting document.
9. 10 signed and sealed copies, one reduced copy no larger than 8½" X 11" or 8½" X 14" and a pdf file.
10. After City Council action and incorporation of all changes to final plat documents, return a minimum of 4 mylars, 4 bond copies and 1 reduced copy to the Community Development Department. All copies shall be signed by the owner(s) signed and sealed by the surveyor.
11. Attach site plan and/or other documents that illustrate this request.
12. Include nonrefundable filing fee with check made payable to Council Bluffs City Clerk.
    a. Preliminary Plan: $250 + $5.00 per lot
    b. Variance with Preliminary Plan: $200 per variance
    c. Final Plat - Major Subdivision: $250
    d. Final Plat – Minor Subdivision/Replat: $250 + $5.00 per lot

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For Office Use Only

Case Number: _____

Planning Commission: _____
Published: _____
Action: _____

Date Complete Application Received: _____

City Council: _____
Public Hearing Final Plat: _____
Action: _____

Associated Case Numbers: _____

Check Number/Amount: _____

Other Comment(s): _____