

**APPROVAL CHECKLIST  
WAIVER OF THE REFILEING RULE  
Requirements for filing a petition**

- μ **1. One (1) completed checklist** (this form).
- μ **2. One (1) completed petition, typewritten**, signed by the owner of the subject property or an authorized agent, notarized, and filed at least 35 days prior to a scheduled public hearing.
- μ **3. One (1) copy of the legal description** attached to the petition.

*Metes and bounds descriptions should include two (2) copies of the perimeter survey, drawn to scale.*

**- or -**

*Recorded subdivision legal description includes lot number, section number, subdivision name, plat book number with page number and must include a plat map (plat maps are available in Room 741 for a nominal charge).*

- μ **4.** Once completed copy of the **Findings of Fact** for the waiver of the refileing rule indicating a substantial change from the previous petition.
- μ **5. One (1) copy of the Letter of Denial or withdrawal or dismissal.**
- μ **6. One (1) copy of Zoning Base Map**, scale of 1 = 1000, **with the boundaries of the site indicated**. Base maps are available in Room 1821 for a nominal charge. Zoning Base Maps may be downloaded from the city website at: [www.indygov.org/dmdplan](http://www.indygov.org/dmdplan) and then go to 'Maps' then click on 'Base Maps'.
- μ **7. Non-refundable filing fee.** Checks are to be made payable to "Office of Finance and Management".
- μ **8. Refundable deposit** for the On-Site Notice. The On-Site Notice must be posted in a conspicuous location along each street frontage of the affected property. A deposit of \$75 per sign must be provided and may be rendered either at the time of filing or at the time of receipt of the Notice. Checks are to be made payable to "Office of Finance and Management".
- μ **9. Contact person** identified. The Contact Person will be notified when Legal Notice is prepared; contacted to provide additional information; and will receive the written Staff Report:

Name (print): \_\_\_\_\_

Address: \_\_\_\_\_

Daytime Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

**All forms must be typewritten and all documents must be legible !**