



City of Rio Rancho

Development Services

3200 Civic Center Circle NE, 1st Floor
Rio Rancho, NM 87144
(505) 891-5005 Fax: (505) 896-8994

Zone Map Amendment

Instructions

The application must include:

1. A complete application form signed by the owner. If the application is being submitted by an agent, then a letter of authorization from the property owner must accompany the application. (1 copy)
2. A location map from the City's Zone Atlas (available online at www.ci.rio-rancho.nm.us) with the current **and** proposed zoning of the property (1 copy)
3. An accurate sketch, drawing, or survey of the property. One copy if printed in black and white on an 11" x 17" sheet or smaller. Eight (8) copies if printed in color or on a sheet larger than 11" x 17".

Notes

- A development plan may be required, depending on the nature of the Zone Map Amendment request. The development plan should include a site plan and may include landscape plans and building elevations. One copy if printed in black and white on an 11" x 17" sheet or smaller. Eight (8) copies if printed in color or on a sheet larger than 11" x 17".
- Additional copies of large plan sheets or color plans may be required for the Planning and Zoning Board hearing and Governing Body hearing.
- Any questions or concerns you may have regarding Zone Map Amendments can be emailed to dwood@ci.rio-rancho.nm.us, rmeadows@ci.rio-rancho.nm.us, or by calling the City of Rio Rancho, Development Services, at 505-891-5005.
- A request for a Zone Map Amendment is initially reviewed by staff for conformance with the City's Vision 2020 - Integrated Comprehensive Plan or any Master Plan, Corridor Plan or Specific Area Plan that has been adopted for the area within which the subject property is located. Reasons for amending the zone map may include bringing a property into conformance with an adopted plan; a change in the surrounding area's character; to provide for a public purpose or community need; or because of an error in the original zoning.
- Please be advised that the City does not enforce private deed restrictions and protective covenants when approving zoning. The applicant should research such restrictions to be sure the intended land use is consistent with private deed restrictions and protective covenants to avoid a potential legal challenge.



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Fees

Less than one (1) acre _____	\$ 266.00
One (1) to 4.99 acres _____	\$ 531.00
Five (5) to 9.99 acres _____	\$ 797.00
Ten (10) to 49.99 acres _____	\$1,063.00
Fifty (50) to 100 acres _____	\$1,328.00
Over 100 acres _____	\$1,328.00 for the first 100 acres + \$ 266.00 Per each additional acre(s) or portion thereof.

Applicant

Name (Print): _____
 Address: _____
 City: _____ State: _____ Zip: _____
 Phone (W): _____ Phone (Other): _____
 Email: _____
 Proprietary interest in site: _____
 List ALL owners: _____

Agent

Name (Print): _____
 Address: _____
 City: _____ State: _____ Zip: _____
 Phone (W): _____ Phone (Other): _____
 Email: _____
 Description of Request: _____

Legal Description of Property

Existing
 Subdivision/Unit: _____ Block: _____ Lot: _____
 Tract/Parcel: _____ Zoning: _____

Proposed
 Subdivision/Unit: _____ Block: _____ Lot: _____
 Tract/Parcel: _____ Zoning: _____

Site Map of Property

Zone Atlas Page(s): _____ No. of existing lots: _____ No of proposed lots: _____

Total area of site (acres): _____

Density (if applicable): dwelling units per acre: _____

Location of property by streets: On or Near _____

Between _____ And _____

Check off if project was previously reviewed by:

Sketch Plat/Plan Pre-application Review/DRC Date of Review: _____

(Print) Name: _____

Applicant Agent

Signature: _____ Date: _____

Additional Explanation/Justification of Request

For Office Use Only

<input type="checkbox"/> Internal Routing	Application Case Numbers	Action	Fees	Receipt
<input type="checkbox"/> All Check list(s) Complete	_____	_____	_____	_____
<input type="checkbox"/> All Fees Collected	_____	_____	_____	_____
<input type="checkbox"/> Case Numbers Assigned	_____	_____	_____	_____
<input type="checkbox"/> Case History Listed				

Staff Signature: _____ Date: _____

Hearing Date: _____ Actual Hearing Date: _____

Action Taken: _____

If Platting approved, Date Filed with County Clerk: _____

Book: _____ Page: _____ Subdivision: _____