9/2/25, 9:28 AM

City of Willard, MO Printed: 09/02/2025

S FARM ROAD 103 07/25/2025 - 07/24/2026

7854962

Land Use

3e6a1050-69b9-11f0-853b-5f8eb89895b2

General

New

Active

# **Application Review Status**

Pre-Review Not Reviewed

Final-Review Not Reviewed 07/25/2025

### **Application Form Data**

(Empty fields are not included)

First Name

Jacob

Last Name

Hill

Contact Email

j1hill8@icloud.com

Phone Number

(417) 292-1266

Property Owner Name

## Civic Review - Permit & Licensing Software Jacob Hill Phone Number (417) 292-1266 Mailing Street Address 127 N State Hwy Z City Willard State MO Zip Code 65781 Application Type Rezone Street Address of Property S FARM ROAD 103 City Willard State MO Zip Code 65781 Legal Description of Property Subdivision/Sec-Twp-Rng 36-30-23 Block/Qtr NE Lot/Qtr SE Current Zoning Classification of Property AG Parcel ID Number 0736400019 Current Use of Property Agriculture

Mixed Use

Why are you requesting a change in zoning?

Requested Zoning Classification

#### Want to add a tax office and home.

Are there any deed restrictions or restrictive covenants that would affect the use of this property? If so, what are they?

#### No

Has a rezoning ever been requested for this property in the past by the current owner? What zoning classification was requested and when?

#### No

Has a rezoning ever been requested for this property in the past by the current owner? What zoning classification was requested and when?

#### No

Provide a list of property owners' names and addresses within 185 feet of the area to be rezoned that has been compiled from the records of the Greene County Assessor's Office or prepared by a title company authorized to issue title policies in the State of Missouri.

□ Report.csv

### Signature

I HEREBY CERTIFY THAT THE INFORMATION PROVIDED ON THIS APPLICATION IS TRUE AND CORRECT; THAT I HAVE READ AND UNDERSTAND THE PROCEDURES, ORDINANCES, AND REQUIREMENTS ASSOCIATED WITH THE APPLICATION AND REVIEW PROCESS. I ALSO UNDERSTAND THAT THIS APPLICATION WILL EXPIRE WITHIN 180 DAYS OF THE DATE OF MY SIGNING, UNLESS A REQUEST FOR AN EXTENSION IS RECEIVED AND APPROVED BY THE DIRECTOR OF DEVELOPMENT PRIOR TO THE EXPIRATION DATE. FURTHERMORE, I ACKNOWLEDGE THAT I WILL BE RESPONSIBLE FOR ANY AND ALL COSTS INCURRED BY

PLAN REVIEWS PERFORMED BY CONSULTANTS OF THE CITY, CERTIFIED MAILING OR PUBLICATION COSTS FOR REQUIRED

LEGAL NOTICE, AND RECORDING FEES. THESE COSTS MAY BE PAID BY THE CITY AND REIMBURSED BY THE APPLICANT UPON INVOICING.

Jacob Hill

