

# Crisp County

## Application Instructions For

# REZONING or SPECIAL USE

### Instructions for Applicant:

Complete this form and the appropriate attachments in order to be apply for a **REZONING** or approval of a **Special Use** on a property. Refer to Chapter 2, Article II, Article III and Article IV of the Land Development Code for more detail.

Fill in the top boxes and have your signature notarized. Deliver the application and all attachments to the Planning Director at 210 South 7<sup>th</sup> Street, Room 205, Cordele, Georgia 31015. You can reach the Planning Director at 229-276-2640 during normal working hours to discuss your application or if you have any questions.

**NOTE: If your application qualifies as a “Development of Regional Impact” (see Chapter 2, Article XIV of the Code) then you must file your application with the River Valley Regional Development Center before you submit your application to the County.**

- Fill in your name, address, and telephone number, the property’s location and current zoning category.
- Check the appropriate box as to whether you are the property owner, an attorney representing the property owner, or someone else representing the owner.
- If you do not personally own a majority interest in the property, have the owner(s) prepare an Owner’s Authorization giving you permission to file the application, and attach it to the application (see the Owner’s Authorization Form that is in this application package).
- Check the appropriate box showing what you are applying for: a **Rezoning** (show the zoning district that you are requesting) a **Special Use** (list the specific special use from the table under Section 3.1 for the zoning district you have or are applying for), or a change in a condition that was imposed by the County Commission when the property was previously rezoned or had a Special Use approved.

**NOTE: File a separate application for each Rezoning request naming a different zoning District. However, a Special Use request can be combined with a Rezoning request on the same property.**

- Check the boxes for all of the items that you have attached:
  - Application fee: attach a check or money order for the appropriate fee made out to Crisp County. **DO NOT ATTACH CASH.**
  - Attach a legal description of the property accurately describing the boundary of the property for which the change is requested. You may find this on your deed or from a boundary survey made for the property.
  - Attach a Sketch Plan if what you are proposing will involve any new construction or alteration of the site for multi-family, a nonresidential use, or a PUD zoning. A Plan Review Checklist for a Sketch Plan is included in this application for your information. (A Sketch Plan is not required for single-family or duplex residential use.)
  - Fill out a Review Checklist Form for your Rezoning or Special Use request, as appropriate, and attach to the application (see the forms included in this application package).
  - Attach a completed Campaign Contribution Disclosure form, listing ALL owners of the property. Also indicate contributions or gifts you or your attorney have made over the past two years that in the aggregate total \$250 or more to any Crisp County Commissioner.

# Crisp County - Application Instructions for Rezoning or Special Use

## PUBLIC NOTICE REQUIREMENTS:

The Code requires public notice for each of your Rezoning and/or Special Use requests. The Planning Director will tell you when and where the County Commission will hold their public hearing on your application.

- The County will publish a legal notice in the newspaper regarding your application and announcing the time and place of the public hearing.
- At least 15 days before the County Commission's public hearing on your application, the County will post a sign in a conspicuous location along each street frontage of the property. (If the property has no street frontage, the sign will be placed on each street where you will have access to the property.)
- Before the County Commission's public hearing, the Planning Director may mail a notice to all persons owning property located adjacent to or across the street from the property that is the subject matter of the zoning change.
- Each public notice will state the following:
  - \*The date, time and place for the public hearing;
  - \*The present zoning classification of the property; and
  - \*The nature of your request (such as "Rezoning to RS1" or "Special Use for a Day Care Center.").

### **County Actions:**

Once your application has been completed and received. The Planning Director has 5 working days in which to determine that your application is complete or to return it to you for additional information.

The public hearing will be held at the time advertised. At the public hearing, the applicant will be allowed to speak first in order to present the application. Others in support of the application may then speak, followed by those in opposition to the application. The applicant may then be allowed time for rebuttal if adequate time remains. Rebuttal must be limited to points or issues raised by opponents to the application at the hearing.

The County Commission will consider approval or denial of the application for rezoning & special uses at their next meeting after the public hearing. You are invited to attend the meeting, but may not make a presentation.

The final action taken by the Board of Commissioners will be indicated on the application form, along with any conditions that the Commission imposes on the property if approved, and a copy will be given to you as official notice of their final action.

If the application is withdrawn (Chapter 2, Article IV, Sec. 2-23 for details), it will be noted on the application form and a copy will be given to you for your records.

**NOTE: Applications for zoning changes on the same property may not be considered more often than once every 12 months, and withdrawals with prejudice cannot be refiled for 6 months.**

**Crisp County Application Form**

**REZONING or SPECIAL USE**

**Applicant:** \_\_\_\_\_ **Telephone No.:** \_\_\_\_\_

**Applicant's Address:** \_\_\_\_\_

**Property Location:** \_\_\_\_\_ **Current Zoning:** \_\_\_\_\_

**Applicant is:**  Property Owner  Other:  Attorney for Property Owner (Attach Owner's Authorization)  
 Other Representative of the Owner (Attach Owner's Authorization)

**Type of Application**

- Rezoning to: \_\_\_\_\_
- Special Use: \_\_\_\_\_
- Change in Conditions of Approval

**Attachments**

- Application Fee  Other: \_\_\_\_\_
- Boundary Description \_\_\_\_\_
- Sketch Plan  (Not required) \_\_\_\_\_
- Review Checklist
- Campaign Contribution Disclosure Form

This is a Development of Regional Impact (see Section 2.12 of the Code). A copy has been filed with the Middle Flint RDC.

attest that this Application and its attachments are accurate to the best of my knowledge.

Sworn to and subscribed before me this

\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_

\_\_\_\_\_  
Notary Public

\_\_\_\_\_  
Signature of Applicant (to be notarized)

..... **DO NOT WRITE IN THE BOXES BELOW** .....

**Scheduled for Public Hearing on . .**

- Newspaper Ad Date: \_\_\_\_\_
- Sign on Property Date: \_\_\_\_\_
- Letters to Owners Date: \_\_\_\_\_

**. . Date:** \_\_\_\_\_  Review Checklist by staff is attached

**Comments:**

**Final Action by Board of Commissioners**

- Approved
- Approved with Conditions
- Denied

**Date:** \_\_\_\_\_

**Conditions of Approval:**

**Application Withdrawn**

- By Planning Director
- By Board of Commissioners

**Date:** \_\_\_\_\_

- Without Prejudice
- With Prejudice - cannot be refiled for 6 months

**Application Number**

**Z -** \_\_\_\_\_

**Rec'd:** \_\_\_\_\_



This is to certify that ( I am  we are  I am the Corporate Secretary of a Corporation that is) the owner of a majority interest in the property that is the subject of the attached application.

By execution of this form, this is to authorize the person named as "applicant" below, acting on behalf of the owner, to file for and pursue a request for approval of the following:

(  Check each that applies and  cross out each that does not apply)

- Rezoning
- Special Use
- Appeal from Administrative Decision
- Hardship Variance
- Flood Protection Variance
- Special Exception
- Project Approval
- Development Permit
- Final Subdivision Plat Approval

Applicant:

\_\_\_\_\_

Applicant's Address:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(Notarized)

\_\_\_\_\_  
Signature of Owner

(Notarized)

\_\_\_\_\_  
Signature of Owner

(Notarized)

\_\_\_\_\_  
Signature of Owner

Attach additional sheets as needed.

**Corporations – attach copy of corporate resolution approving authorization.**

The following information is provided in accordance with the Georgia Conflict of Interest in Zoning Actions Act, O.C.G.A. 36-67A-1 et seq. **Attach additional sheets as needed.**

The property that is the subject of this application is owned by:

- Individual(s)
- Corporation
- Partnership
- Limited Partnership
- Joint Venture

All persons, corporations, partners, limited partners, or joint venturers party to ownership of the property that is the subject of the attached application are listed below:

_____	_____
_____	_____
_____	_____
_____	_____

The name and address of the applicant submitting this application is:

\_\_\_\_\_

\_\_\_\_\_

Within the two years preceeding the date of this application, **the applicant** has made campaign contributions or gifts aggregating \$250 or more to the following members of the Crisp County Board of Commissioners:

Name of Official	Amount of Contribution or Gift	Date of Contribution or Gift
_____	_____	_____
_____	_____	_____
_____	_____	_____

The name and address of the attorney representing the applicant submitting this application is:

\_\_\_\_\_

\_\_\_\_\_

Within the two years preceeding the date of this application, **the attorney representing the applicant** has made campaign contributions or gifts aggregating \$250 or more to the following members of the Crisp County Board of Commissioners:

Name of Official	Amount of Contribution or Gift	Date of Contribution or Gift
_____	_____	_____
_____	_____	_____
_____	_____	_____

APPLICANT:

\_\_\_\_\_

PROJECT NAME:

\_\_\_\_\_

PROPERTY LOCATION:

\_\_\_\_\_

**The Sketch Plan shall show the following, as appropriate to the zoning or conditional use requested:**

- Name and address of the property owner.
- Name, address, and telephone number of the applicant.
- As appropriate: date of survey and source of datum, north point and approximate scale, date of plan drawing, and revision dates.
- Proposed use of the property.
- Location (Land District and Land Lot) and size of the property in acres (or in square feet if less than an acre).
- Location sketch of the property in relation to the surrounding area with regard to well known landmarks such as arterial streets, railroads or others. Sketches may be drawn in freehand and at a scale sufficient to show clearly the information required, but not less than one (1) inch equal to two thousand (2,000) feet. US. Geological Survey maps may be used as a reference guide for the location sketch.
- Zoning district classification of the subject property and all adjacent properties, and zoning district boundaries if they cross the property.
- Man-made features within and adjacent to the property, including existing streets and names, city and county political boundary lines, and other significant information such as location of bridges, utility lines, existing buildings to remain, and other features as appropriate to the nature of the request.
- The proposed project layout including:
  - For office or industrial parks, approximate lot lines and street right-of-way lines, along with the front building setback line on each lot.
  - For multi-family and nonresidential development projects, the approximate outline and location of all buildings, and the location of all minimum building setback lines, outdoor storage areas, buffers, parking areas, and driveways.
- A statement as to the source of domestic water supply (such as well, City or County water).
- A statement as to the provision for sanitary sewage disposal (such as septic tank, public sewer).
- The approximate location of proposed storm water detention facilities.
- Such additional information as you feel may be useful to permit an understanding of the proposed use and development of the property.

Prepared by:

\_\_\_\_\_

Date:

\_\_\_\_\_

DATE: \_\_\_\_\_

APPLICATION: \_\_\_\_\_

PROPERTY: \_\_\_\_\_

Standard	YES	N/A	NO	Comments
1 Is the proposed use consistent with the stated purpose of the zoning district that is being requested?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2 Is the proposed use suitable in view of the zoning and development of adjacent and nearby property?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3 Will the proposed use adversely affect the existing use or usability of adjacent or nearby property?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4 Is the proposed use compatible with the purpose and intent of the Comprehensive Plan?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5 Are there substantial reasons why the property cannot or should not be used as currently zoned?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6 Will the proposed use cause an excessive or burdensome use of public facilities or services, including but not limited to streets, schools, water or sewer utilities, and police or fire protection?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7 Is the proposed use supported by new or changing conditions anticipated by the Comprehensive Plan or reflected in the existing zoning on the property or surrounding properties?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8 Does the proposed use reflect a reasonable balance between the promotion of the public health, safety, morality or general welfare and the right to unrestricted use of property?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Prepared by: \_\_\_\_\_

Date: \_\_\_\_\_

DATE: \_\_\_\_\_

APPLICATION: \_\_\_\_\_

PROPERTY: \_\_\_\_\_

Standard	YES	N/A	NO	Comments
1 Will the proposed special use be consistent with the stated purpose of the zoning district in which it will be located?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2 Will the proposed special use increase local or state expenditures in relation to cost of servicing or maintaining neighboring properties?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3 Will the establishment of the special use impede the normal and orderly development of surrounding property for uses predominate in the area?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4 Is the location and character of the proposed special use consistent with a desirable pattern of development for the locality in general?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5 Is or will the type of street providing access to the use be adequate to serve the proposed special use?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6 Is or will access into and out of the property be adequate to provide for traffic and pedestrian safety, the anticipated volume of traffic flow, and access by emergency vehicles?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7 Are or will public facilities such as schools, water or sewer utilities, and police or fire protection be adequate to serve the special use?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	



**Review Checklist**  
**SPECIAL USE REQUEST**  
page 2 of 2

APPLICATION: \_\_\_\_\_

Standard	YES	N/A	NO	Comments
8 Are or will refuse, service, parking and loading areas on the property be located or screened to protect other properties in the area from such adverse effects as noise, light, glare or odor?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
9 Will the hours and manner of operation of the of the special use have adverse effects on other properties in the area?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
10 Will the height, size or location of the buildings or other structures on the property be compatible with the height, size or location of buildings or other structures on neighboring properties?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Prepared by: \_\_\_\_\_ Date: \_\_\_\_\_