ANNEXATION & REZONING APPLICATION



CITY OF AUBURN COMMUNITY DEVELOPMENT DEPARTMENT 1369 4TH AVE, AUBURN, GA 30011 (770) 963-4002

www.cityofauburn-ga.org

ANNEXATION & REZONING APPLICATION AN APPLICATION TO AMEND THE OFFICIAL ZONING MAP FOR THE CITY OF AUBURN, GA.

APPLICANT INFORMATION	PROPERTY OWNER INFORMATION	
NAME:	NAME:	
ADDRESS:	ADDRESS:	
CITY:	CITY:	
STATE: ZIP:	STATE: ZIP:	
PHONE:	PHONE:	
EMAIL:	EMAIL:	
CONTACT PERSON:	PHONE:	
EMAIL:		
APPLICANT IS: □ OWNER'S AGENT □ PRO	DPERTY OWNER CONTRACT PURCHASER	
PRESENT ZONING DISTRICT(S):	REQUESTED ZONING DISTRICT:	
PARCEL NUMBER(S):	ACREAGE:	
ADDRESS OF PROPERTY:		
PROPOSED DEVELOPMENT:		
RESIDENTIAL DEVELOPMENT	NON-RESIDENTIAL DEVELOPMENT	
NO OF LOTE/DWELLING LINITS:	NO OF BUILDINGS /LOTS:	

RESIDENTIAL DEVELOPMENT	NON-RESIDENTIAL DEVELOPMENT
NO. OF LOTS/DWELLING UNITS:	NO. OF BUILDINGS/LOTS:
DWELLING UNIT SIZE (SQ.FT.):	TOTAL BUILDING SQ.FT.:
GROSS DENSITY:	DENSITY:
NET DENSITY:	

^{*}PLEASE ATTACHED A LETTER OF INTENT EXPLAINING PROPOSED DEVELOPMENT*

REZONING APPLICANT'S RESPONSE STANDARDS GOVERNING THE EXERCISE OF THE ZONING POWER

PURSUANT TO REQUIREMENTS OF THE ZONING ORDINANCE, THE CITY COUNCIL FINDS THAT THE FOLLOWING STANDARDS ARE RELEVANT IN BALANCING THE INTEREST IN PROMOTING THE PUBLIC HEALTH, SAFETY, MORALITY OR GENERAL WELFARE AGAINST THE RIGHT TO THE UNRESTRICTED USE OF PROPERTY AND SHALL GOVERN THE EXERCISE OF THE ZONING POWER.

PLEASE RESPOND TO THE FOLLOWING STANDARDS IN THE SPACE PROVIDED OR USE AN ATTACHMENT AS NECESSARY:

(1) WHETHER A PROPOSED REZONING WILL PERMIT A USE THAT IS SUITABLE IN VIEW OF THE USE AND DEVELOPMENT OF ADJACENT AND NEARBY PROPERTY:
(2) WHETHER A PROPOSED REZONING WILL ADVERSELY AFFECT THE EXISTING USE OF
USABILITY OF ADJACENT OR NEARBY PROPERTY:
(3) WHETHER THE PROPERTY TO BE AFFECTED BY A PROPOSED REZONING HAS REASONABLE ECONOMIC USE AS CURRENTLY ZONED:
(4) WHETHER THE PROPOSED REZONING WILL RESULT IN A USE WHICH WILL OR COULD CAUSE AN EXCESSIVE OR BURDENSOME USE OF EXISTING STREETS, TRANSPORTATION FACILITIES, UTILITIES, OR SCHOOLS:
(5) WHETHER THE PROPOSED REZONING IS IN CONFORMITY WITH THE POLICY AND INTENT
OF THE LAND USE PLAN:
(6) WHETHER THERE ARE OTHER EXISTING OR CHANGING CONDITIONS AFFECTING THE USE AND DEVELOPMENT OF THE PROPERTY WHICH GIVE SUPPORTING GROUNDS FOR EITHER APPROVAL OR DISAPPROVAL OF THE PROPOSED REZONING:

REZONING APPLICANT'S CERTIFICATION

THE UNDERSIGNED BELOW IS AUTHORIZED TO MAKE THIS APPLICATION. THE UNDERSIGNED IS AWARE THAT NO APPLICATION OR REAPPLICATION AFFECTING THE SAME LAND SHALL BE ACTED UPON WITHIN 12 MONTHS FROM THE DATE OF LAST ACTION BY THE CITY COUNCIL UNLESS WAIVED BY THE CITY COUNCIL. IN NO CASE SHALL AN APPLICATION OR REAPPLICATION BE ACTED UPON IN LESS THAN SIX (6) MONTHS FROM THE DATE OF LAST ACTION BY THE CITY COUNCIL.

SIGNATURE OF APPLICANT	DATE	
PRINT NAME AND TITLE		
SIGNATURE OF NOTARY PUBLIC	DATE	NOTARY SEAL

REZONING PROPERTY OWNER'S CERTIFICATION

THE UNDERSIGNED BELOW, OR AS ATTACHED, IS THE OWNER OF THE PROPERTY CONSIDERED IN THIS APPLICATION. THE UNDERSIGNED IS AWARE THAT NO APPLICATION OR REAPPLICATION AFFECTING THE SAME LAND SHALL BE ACTED UPON WITHIN 12 MONTHS FROM THE DATE OF LAST ACTION BY THE CITY COUNCIL UNLESS WAIVED BY THE CITY COUNCIL. IN NO CASE SHALL AN APPLICATION OR REAPPLICATION BE ACTED UPON IN LESS THAN SIX (6) MONTHS FROM THE DATE OF LAST ACTION BY THE CITY COUNCIL.

SIGNATURE OF PROPERTY OWNER		DATE
PRINT NAME AND TITLE		
SIGNATURE OF NOTARY PUBLIC	DATE	NOTARY SEAL

CONFLICT OF INTEREST CERTIFICATION FOR REZONING

THE UNDERSIGNED BELOW, MAKING APPLICATION FOR A REZONING, HAS COMPLIED WITH THE OFFICIAL CODE OF GEORGIA SECTION 36-67A-1, ET. SEQ, CONFLICT OF INTEREST IN ZONING ACTIONS, AND HAS SUBMITTED OR ATTACHED THE REQUIRED INFORMATION ON THE FORMS PROVIDED.

SIGNATURE OF PROPERTY OWNER		DATE
PRINT NAME AND TITLE		
SIGNATURE OF NOTARY PUBLIC	DATE	NOTARY SEAL
DISCLOSURE OF CA	AMPAIGN CONTRIBUTIO	NS
HAVE YOU, WITHIN THE TWO YEARS IMME APPLICATION, MADE CAMPAIGN CONTRIB MEMBER OF THE CITY COUNCIL OR A MEM	UTIONS AGGREGATING \$2	50.00 OR MORE TO A
☐ YES ☐ NO		
YOU	JR NAME	
IF THE ANSWER IF YES, PLEASE COMPLETE	E THE FOLLOWING SECTIO	N:

NAME AND POSITION OF GOVERNMENT OFFICIAL	CONTRIBUTIONS (LIST ALL WHICH AGGREGATE TO \$250 OR MORE)	DATE CONTRIBUTION WAS MADE (WITHIN LAST TWO YEARS)

ATTACHED ADDITIONAL SHEETS IF NECESSARY, TO DISCLOSE OR DESCRIBE ALL CONTRIBUTIONS.

REZONING CHECKLIST

THE FOLLOWING IS A CHECKLIST OF INFORMATION REQUIRED FOR SUBMISSION OF A REZONING APPLICATION. THE COMMUNITY DEVELOPMENT DEPARTMENT RESERVES THE RIGHT TO REJECT ANY INCOMPLETE APPLICATION.

□ COMPLETED APPLICATION FORMS AND CERTIFICATIONS
□LEGAL DESCRIPTION
□BOUNDARY SURVEY
□SITE PLAN - THREE (3) COPIES AND ONE (1) 8-1/2" X 11" REDUCTION
\Box A PDF, CD, OR USB THUMB DRIVE WITH DIGITAL COPIES OF THE PLANS
□LETTER OF INTENT
□\$1,000.00 APPLICATION FEE - MAKE CHECKS PAYABLE TO CITY OF AUBURN
ADDITIONAL EXHIBITS (IF REQUIRED):
□SITE PLAN, ARCHITECTURAL EXHIBITS, AND/OR NARRATIVE REQUIREMENTS.
□TRAFFIC STUDY
□REVIEW FORM FOR DEVELOPMENT OF REGIONAL IMPACT (DRI)
□BUILDING COMPLIANCE INSPECTION