



Department of Community Development

Application for Rezoning

Date of Application: _____ Application #: _____

I hereby request that the property described in this application be rezoned from:

Zoning District Designation: _____ to Zoning District Designation: _____

Is this request consistent with the City of Temple Comprehensive Plan and Future Land Use Map?

Yes _____ No _____ (Must be verified by P&Z Staff)
(If No, a Plan Amendment will be required)

Address of Property:

Land Lot: _____ District: _____ Section: _____ Parcel: _____

Area: _____ Acres or _____ Square Feet

Current Use of Property: _____

Proposed Use of Property: _____

If existing property/structure is vacant or not in use, how long has it been vacant or not in use?

Owner of Property: _____

Mailing Address:

Telephone Number (Daytime): _____

Applicant: _____

Mailing Address:

Telephone Number (Daytime): _____

Summary of Proposed Rezoning:

Give a summary description of the proposed project in the space provided below (attach additional pages if necessary). The narrative should be based on the Standards & Criteria for Rezoning. If this application is for Conditional Rezoning, please list the conditions.

[illegible]

ITEMS THAT MUST ACCOMPANY APPLICATION

- A. **Owner's Signature or Affidavit** - If the owner and applicant are not the same, the owner must sign the application or complete the attached affidavit.
- B. **Plat** - A copy of a plat, drawn by an engineer or land surveyor, describing in detail the tract, parcel or lot of land proposed to be rezoned must accompany each application. The plat must include the following information:
1. A current boundary survey and plot plan, dimensioned and to scale, prepared by a registered surveyor, architect or engineer showing the seal of such surveyor, architect, or engineer.
 2. This survey shall be a plat of the land in question, or a description by metes and bounds, bearings and distances of the land, or if the boundaries conform to the lot boundaries within a subdivision for which a plat is recorded in the land records of Carroll County, then, the lot, block, and subdivision designations with appropriate plat reference.
 3. A description of existing land uses on adjacent and surrounding property.
- C. **Preliminary Site Plan** - Submit one (1) full size copy and Twenty (20) 11x17 copies of a preliminary site plan, including but not limited to: preliminary plans for development, building locations (including accessory buildings), parking areas, adjacent streets, entrances and exits to the property, land lot lines, required buffer areas, future right-of-way, wetlands, floodplains, utilities, and water retention.
- D. **Warranty Deed** - A copy of the recorded warranty deed to the property must accompany each application.
- E. **Proof of Taxes Paid** - Proof that all ad valorem taxes due on the property have been paid must accompany each application.
- F. **Certificate Concerning Campaign Contributions** - Certificate concerning campaign contributions must accompany each application.
- G. **Fees** - See attached fee schedule. Checks should be made payable to "City of Temple". Fees are non-refundable.
- H. **Conditional Re Zonings** - An applicant may apply for conditional zoning and so state on the application. The conditional zoning applications may be based on written conditions contained within the relevant section of the application only or it may be based on the narrative AND a site plan.
- I. Any other information required by the Department of community development which is related to the present or proposed use of the property.

I have read and understand the attached application and zoning procedures. I also hereby authorize the Planning staff to inspect the premises that are the subject of this rezoning application.

Signature of Applicant

Date

FOR OFFICE USE ONLY

Date Received: _____ Hearing Date: _____

Receipt Number: _____ Received by: _____

AFFIDAVIT

Authorization by Property Owner

I swear that I am the owner of the property that is the subject matter of the attached application, as it is shown in the records of Carroll County, Georgia.

I authorize the persons named below to act as applicant in the pursuit of the obtaining the Special Use Permit for this property.

Name of Applicant: _____

Address:

Telephone Number: _____

Signature of Owner

Date

Personally Appeared Before Me:

Who swears that the information contained in this authorization is true and correct to the best of his or her knowledge and belief.

Notary Public

Date

CERTIFICATE CONCERNING CAMPAIGN CONTRIBUTIONS

Has the applicant (individual, corporation, partnership, firm, enterprise, franchise, association or trust) made, within two years immediately preceding the filing of this application for a **Special Use Permit**, campaign contributions aggregating \$250.00 or more or made gifts having in aggregate a value of \$250.00 or more to a member of the Board of Commissioners or Planning Commission who will consider the application?

YES _____

NO _____

If so, the applicant and the attorney representing the applicant must file a disclosure report with the Board of Commissioners of Carroll County, within ten (10) days after this application is first filed.

Please supply the following information, which will be considered as the required disclosure:

1. **Member:** The name of the member(s) of the Board of Commissioners or Planning Commission to whom the campaign contribution or gift was made.
2. **Contribution:** The dollar amount of each campaign contribution made by the applicant to the member of the Board of Commissioners or Planning commission during the two years immediately preceding the filing of this application, and the date of each such contribution.
3. **Gift:** An enumeration and description of each gift having a value of \$250.00 or more made by the applicant to a member of the Board of Commissioners or Planning Commission during the two years immediately preceding the filing of this application.

<u>Member</u>	<u>Contribution</u>	<u>Date</u>	<u>Gift</u>
	\$		
	\$		
	\$		
	\$		
	\$		

We certify that the foregoing information is true and correct, this _____ day of _____

20_____.

Applicant

Applicant's Attorney (if any)

Criteria & Standards for Considering a Rezoning Application

All amendments to the zoning map shall be viewed in light of the following standards used to interpret the balance between an individual's unrestricted right to the use of his or her property and the public health, safety, morality or general welfare of the community. Emphasis may be placed on those criteria most applicable to the specific use proposed:

Sec. 38-692. - Standards for rezoning and special use approval; change in conditions of approval.

Is the proposed use or development consistent with the stated purpose of the zoning district?

Is the proposed use suitable in view of the zoning and development of adjacent and nearby property?

Will the proposed use not adversely affect the existing use or usability of adjacent or nearby property?

Is the proposed use compatible with the purpose and intent of the comprehensive plan?
Are there substantial reasons why the property cannot or should not be used as currently zoned?

Will the proposed use not 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?

Is the proposed use supported by new or changing conditions not anticipated by the comprehensive plan or reflected in the existing zoning on the property or surrounding properties?

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?