

**APPLICATION TO AMEND THE
OFFICIAL ZONING MAP OF
THE CITY OF SENOIA**



**City of Senoia
P.O. Box 310
Senoia, GA 30276
770.599.3679**

Name of Applicant _____ Phone No. _____

Mailing Address _____

Name of Property Owner _____ Phone No. _____
(Attach additional page if there is more than one owner)

Address of Property _____

Zoning Classification: Present _____ Requested _____

Use of Property: Present _____ Requested _____

_____ If the requested change is to extend an existing adjacent zoning district to include this property, explain below why the proposed change should be made.

_____ If the requested change is not to extend an adjacent zoning district, explain below why this property should be placed in a different zoning district than all adjoining property. (How does it differ from adjoining property, and why should it be subject to different restrictions than those applying to adjoining property?)

Attach the following documents:

1. Written legal description of the property (copy of deed) – full metes and bounds description rather than plat reference.
2. Plat showing property lines and lengths and bearings, adjoining streets, locations of existing buildings, north arrow and scale. Submit seven copies if the plat is 11” x 17” or smaller. For larger plats, submit twenty (20) copies. Submit on PDF of the plat.
3. List of adjacent property owners
4. Disclosure of Campaign Contributions and Gifts Form.
5. If Property Owner and Applicant are not the same, Authorization by Property Owner Form or Authorization of Attorney Form.
6. Filing fee (\$450) payable to the City of Senoia.
7. Letter of Intent, conceptual plan

I hereby authorize the staff of City of Senoia to inspect the premises of the above – described property. I hereby depose and say that all statements herein and attached statements submitted are true and correct to the best of my knowledge and belief.

Sworn to subscribed before me
This _____ day of _____, 20 _____.

Signature of Applicant

Notary Public

Planning Commission Action:

Date of Hearing: _____

Commission's Recommendation: _____

Conditions: _____

Mayor and Council of the City of Senoia:

Date of Hearing: _____

Council's Decision _____

Conditions required: _____

DISCLOSURE OF CAMPAIGN CONTRIBUTIONS

(Required by Title 36, Chapter 67A, Official Code of Georgia Annotated)

Reference: Application filed on _____, 20____, to rezone real property described as follows:

Within two years preceding the above filing date, the Applicant has made campaign contributions aggregating \$250.00 or more to each member of the City Council of the City of Senoia who will consider the Application and is listed below. List (1) the name and official position of the local government official and (2) the dollar amount, description, and date of each such campaign contribution.

I hereby depose and say that all statements herein are true, correct and complete to the best of my knowledge and belief.

Signature of Applicant

Sworn to and subscribed before me

This ____ day of _____, 20____.

Notary Public

DISCLOSURE OF FINANCIAL INTERESTS
(Required by Title 36, Chapter 67A, Official Code of Georgia Annotated)

Reference: Application filed on _____, 20____, to rezone real property described as follows:

_____ The undersigned official of the City of Senoia has a property interest (Note 1) in said property as follows:

_____ The undersigned official of the City of Senoia has a financial interest (Note 2) in a business entity (Note 3) which has a property interest in said property, which financial interest is as follows:

_____ The undersigned official of the City of Senoia has a member of the family (Note 4) having a property interest in said property of a financial interest in a business entity in said property, which family member and property interest or financial interest are as follows:

Note 1: Property interests – Direct ownership of real property, including and percentage of ownership less than total ownership.

Note 2: Financial interest – All direct ownership interests of the total assets or capital stock of a business entity where such ownership interest is 10 percent (10%) or more.

Note 3: Business entity – Corporation, partnership, limited partnership, firm, enterprise, franchise, association, or trust.

Note 4: Member of family – Spouse, mother, father, brother, sister, son or daughter.

I hereby depose and say that all statements herein are true, correct and complete to the best of my knowledge and belief.

Signature of Applicant

Sworn to and subscribed before me
This ___ day of _____, 20___.

Notary Public

AUTHORIZATION OF PROPERTY OWNER
Application for Rezoning or Variance

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

I authorize the person named below to act as Applicant in the pursuit of rezoning or a variance of this property.

Name of Applicant _____
Address _____
Telephone No. _____

Signature of Owner

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

AUTHORIZATION OF ATTORNEY
Application of Rezoning or Variance

I swear that as an attorney at law, I have been authorized by the owner to file the attached application.

Signature of Attorney

Name

Address

City State Zip Code

Telephone Number