



# CITY OF NEWNAN, GEORGIA Planning & Zoning Department

25 LaGrange Street  
Newnan, Georgia 30263  
Office (770) 254-2354  
Fax (770) 254-2361

## APPLICATION TO AMEND ZONING MAP

**Note to Applicant:** Please be sure to complete all entries on the application form. If you are uncertain to the applicability of an item, contact The Planning & Zoning Department at 770-254-2354. Incomplete applications or applications submitted after the deadline *will not be accepted.*

Name of Applicant \_\_\_\_\_

Mailing Address \_\_\_\_\_

Telephone \_\_\_\_\_

Property Owner (Use back if multiple names) \_\_\_\_\_

Mailing Address \_\_\_\_\_

Telephone \_\_\_\_\_

Address/Location of Property \_\_\_\_\_

Map # N \_\_\_\_\_ Block # \_\_\_\_\_ Parcel # \_\_\_\_\_ Land Lot \_\_\_\_\_

District/Section \_\_\_\_\_ Size of Property (Square Feet or Acres) \_\_\_\_\_

Present Zoning Classification: \_\_\_\_\_ Proposed Zoning Classification: \_\_\_\_\_

Present Land Use: \_\_\_\_\_

To the best of your ability, please answer the following questions regarding the application:

Explain how conditions have changed that renders the zoning map designation invalid and no longer applicable \_\_\_\_\_  
\_\_\_\_\_

If the proposed zoning map change is an extension of an existing adjacent zoning district, provide an explanation why the proposed extension should be made \_\_\_\_\_  
\_\_\_\_\_

If the requested change is not designed to extend an adjacent zoning district, explain why this property should be placed in a different zoning district than all adjoining property. In other words, how does this property differ from adjoining property and why should it be subject to different restrictions?  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

---

---

Please attach all the following items to the completed application:

1. A letter of intent giving the details of the proposed use of the property which should include, at a minimum, the following information:
  - What the property is to be used for, if known.
  - The size of the parcel or tract.
  - The zoning classification requested and the existing classification at the filing of this application.
  - The number of units proposed.
  - For non-residential projects, provide the density of development in terms of floor area ratio (FAR).
  - Any proposed buffers and modification to existing buffers.
  - Availability of water and sewer facilities including existing distance to property.
2. Name and mailing addresses of all owners of all property within 250 feet of the subject property (available from the County Tax Assessor records). This is encouraged to be submitted in a mail merge Microsoft Word data file format.
3. Legal description of property. This description must establish a point of beginning; and from the point of beginning, give each dimension bounding the property that the boundary follows around the property returning to the point of beginning. If there are multiple property owners, all properties must be combined into one legal description. If the properties are not contiguous, a separate application and legal description must be submitted for each property. For requests for multiple zoning districts, a separate application and legal description must be submitted for each district requested. A copy of the deed may substitute for a separate description.
4. A certified plat (stamped and dated) drawn to scale by a registered engineer, architect, land planner, land surveyor, or landscape architect that shall include the following information:
  - ✓ Boundary survey showing property lines with lengths and bearings
  - ✓ Adjoining streets, existing and proposed, showing right-of-way
  - ✓ Locations of existing buildings dimensioned and to scale, paved areas, dedicated parking spaces, and other property improvements
  - ✓ North arrow and scale
  - ✓ Adjacent land ownership, zoning and current land use
  - ✓ Total and net acreage of property
  - ✓ Proposed building locations
  - ✓ Existing and proposed driveway(s)
  - ✓ Lakes, ponds, streams, and other watercourses
  - ✓ Floodplain, wetlands, and slopes equal to or greater than 20 percent
  - ✓ Cemeteries, burial grounds, and other historic or culturally significant features
  - ✓ Required and/or proposed setbacks and buffers
5. Submit five (5) copies of the plat in a 16" x 24" format minimum and one (1) copy in an 11" x 17" format.
6. Completed Proffered Conditions form.
7. Completed Disclosure of Campaign Contributions and Gifts form.
8. If the applicant and the property owner are not the same, complete the Property Owner's Authorization form and/or the Authorization of Attorney form.
9. For multiple owners, a Property Owner's Authorization form shall be submitted for each owner.
10. A community impact study must be submitted if the development meets any of the following criteria:
  - Office proposals in excess of 200,000 gross square feet
  - Commercial proposals in excess of 250,000 gross square feet
  - Industrial proposals which would employ over 500 persons
  - Multi-Family proposals in excess of 150 units

- 11. A Development of Regional Impact form shall be completed and submitted to the City if the request meets any of the criteria in §40.060 (2)(b)(8) on page 40-5 of the Newnan Zoning Ordinance.
- 12. Fees for Amending the Zoning Map shall be made payable to the **City of Newnan** and are listed below:
  - Single-Family Application.....\$500.00/Plus \$15.00 Per Acre
  - Multi-Family Application.....\$500.00/Plus \$25.00 Per Acre
  - Office/Institutional Application.....\$500.00/Plus \$15.00 Per Acre
  - Commercial Application.....\$500.00/Plus \$25.00 Per Acre
  - Industrial Application.....\$500.00/Plus \$15.00 Per Acre
  - Overlay Zoning Application.....\$350.00

**PLEASE NOTE: THIS APPLICATION MUST BE FILED BY THE 10<sup>TH</sup> OF THE MONTH TO BE CONSIDERED FOR THE PLANNING COMMISSION MEETING OF THE FOLLOWING MONTH.**

I (We) hereby authorize the staff of the City of Newnan to inspect the premises of the above-described property. I (We) do hereby certify the information provided herein is both complete and accurate to the best of my (our) knowledge, and I (we) understand that any inaccuracies may be considered just cause for invalidation of this application and any action taken on this application.

Sworn to and subscribed before me this

\_\_\_\_\_ day of \_\_\_\_\_, 20 .                      Signature of Applicant \_\_\_\_\_

\_\_\_\_\_  
Notary Public                                              (Affix Raised Seal Here)

**FOR OFFICIAL USE ONLY**

DATE OF PRE-APPLICATION CONFERENCE \_\_\_\_\_

RECEIVED BY \_\_\_\_\_

DATE OF FILING \_\_\_\_\_

FILING FEE RECEIVED \_\_\_\_\_

DATE OF NOTICE TO NEWSPAPER \_\_\_\_\_

DATE OF PUBLIC HEARING \_\_\_\_\_

PLANNING COMMISSION RECOMMENDATION (DATE) \_\_\_\_\_

DATE OF TRANSMITTAL TO CITY COUNCIL \_\_\_\_\_

CITY COUNCIL DECISION (DATE) \_\_\_\_\_



City of Newnan, Georgia  
Attachment A  
**Proffered Conditions**

---

---

As part of an application for a rezoning, a property owner **MAY** proffer, in writing, proposed conditions to apply and be part of the rezoning being requested by the applicant. Proffered conditions may include written statements, development plans, profiles, elevations, or other demonstrative materials.  
*(Please refer to §40.130 of the Zoning Ordinance for complete details.)*

Please list any written proffered conditions below:

---

---

---

---

---

---

---

Any development plans, profiles, elevations, or other demonstrative materials presented as proffered conditions shall be referenced below and attached to this application:

---

---

---

---

I do hereby certify the information provided herein is both complete and accurate to the best of my knowledge.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Type or Print Name and Title

\_\_\_\_\_  
Signature of Applicant's Representative

\_\_\_\_\_  
Type or Print Name and Title

\_\_\_\_\_  
Signature of Notary Public

\_\_\_\_\_  
Date

*(Affix Raised Seal Here)*



City of Newnan, Georgia  
Attachment B

# Disclosure of Campaign Contributions & Gifts

Application filed on \_\_\_\_\_, 20\_\_ for action by the Planning Commission on rezoning requiring a public hearing on property described as follows:

The undersigned below, making application for Planning Commission action, 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 this form as provided.

All individuals, business entities, or other organizations<sup>1</sup> having a property or other interest in said property subject of this application are as follows:

Have you as applicant or anyone associated with this application or property, within the two (2) years immediately preceding the filing of this application, made campaign contributions aggregating \$250.00 or more to a member of the Newnan City Council or a member of the Newnan Planning Commission?                      Yes                      No

If YES, please complete the following section (attach additional sheets if necessary):

Name and Official Position of Government Official	Contributions (List all which aggregate to \$250 or more)	Date of Contribution (Within last 2 years)

I do hereby certify the information provided herein is both complete and accurate to the best of my knowledge.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Type or Print Name and Title

\_\_\_\_\_  
Signature of Applicant's Representative

\_\_\_\_\_  
Type or Print Name and Title

\_\_\_\_\_  
Signature of Notary Public                      Date

(Affix Raised Seal Here)

<sup>1</sup>Business entity may be a corporation, partnership, limited partnership, firm, enterprise, franchise, association, trade organization, or trust while other organization means non-profit organization, labor union, lobbyist or other industry or casual representative, church, foundation, club, charitable organization, or educational organization.



City of Newnan, Georgia  
Attachment C

## Property Owner's Authorization

---

---

The undersigned below, or as attached, is the owner of the property which is the subject of this application. The undersigned does duly authorize the applicant named below to act as applicant in the pursuit of a rezoning of the property.

Name of Property Owner \_\_\_\_\_

Telephone Number \_\_\_\_\_

Address of Subject Property \_\_\_\_\_  
\_\_\_\_\_

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

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

Personally appeared before me

\_\_\_\_\_

who swears the information contained  
in this authorization is true and correct  
to the best of his/her knowledge and  
belief.

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

*(Affix Raised Seal Here)*

\_\_\_\_\_  
Date



City of Newnan, Georgia  
Attachment D  
**Attorney's Authorization**

---

---

**NOTE:** *If an attorney-at-law has prepared this application, please fill out the information below:*

I swear as an attorney-at-law, I have been authorized by the owner(s) to file the attached application for a rezoning of property.

\_\_\_\_\_  
(Signature of Attorney)

Name of Attorney \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_

Telephone \_\_\_\_\_

Date \_\_\_\_\_



City of Newnan, Georgia  
Attachment E  
**Rezoning Checklist**

---

---

The following is a checklist of information required for the submittal of a rezoning application. The Planning & Zoning Department will not accept an incomplete application.

- \_\_\_\_\_ Completed application form
- \_\_\_\_\_ Letter of intent
- \_\_\_\_\_ Names and addresses of all owners of all property within 250 feet of the subject property
- \_\_\_\_\_ Legal description of property
- \_\_\_\_\_ Certified plat
- \_\_\_\_\_ Completed Attachment A – Proffered Conditions (if applicable)
- \_\_\_\_\_ Completed Attachment B – Disclosure of Campaign Contributions & Gifts (if applicable)
- \_\_\_\_\_ Completed Attachment C – Property Owner's Authorization (if applicable)
- \_\_\_\_\_ Completed Attachment D – Attorney's Authorization (if applicable)
- \_\_\_\_\_ Community Impact Study (if applicable)
- \_\_\_\_\_ Filing Fee in the form of a check payable to the **City of Newnan**

**Note:** Please attach this form to the filing application.