

# VARIANCE APPLICATION CHECKLIST

P.O. Box 300 700 Hwy 293 Emerson, GA 30137 Phone (770) 382-9819

#### REQUIREMENTS FOR FILING A VARIANCE APPLICATION

ONLY COMPLETE APPLICATION PACKETS WILL BE ACCEPTED FOR CONSIDERATION.

Application for Variance
Legal description of the tract(s) involved in the zoning case.
Current survey showing the dimensions, acreage and location of the tract(s)
prepared by a state registered architect, engineer or land surveyor; such plat
shall also contain the present zoning classification of the tract(s) requested to be
rezoned and all surrounding properties. Must be less than 5 years old from date of application.
Site plan with all applicable requirements listed from the Site Plan Checklist
Any photos, architectural renderings or associated information must be submitted
either electronically in PDF or Word format or printed on letter size at 8.5 x 11
sheets.
Complete Zoning Action Owner Affidavit form for each property owner.
A copy of the recorded warranty deed (or other instrument of title) which vested
title to the property in the application.
A copy of the paid in full tax bill or a letter from the Bartow County Tax
Commissioner stating that all taxes have been paid.
Completed Campaign Disclosure Report.
A non-refundable filing fee.

NOTE: Depending on the complexity of the zoning case more documentation may be required as determined by the zoning administrator.



#### **VARIANCE APPLICATION**

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CASE #_		<u></u>
Filing Fee:		
See fee schedule		
Property Owner Information:		
Property Owner Name:		
Mailing Address:		
Phone Number:	Email:	
Applicant Information:		
Applicant Name:		
Mailing Address:		
Phone Number:	Email:	
Subject Property Information:		
Street Address / Road Name:		
Parcel ID Number:		
Acreage:	Land Lot(s):	
District:	Section:	
Deed Book:	Page Number:	
Current Zoning Classification:		
Type of Variance Requested:		
Ordinance Section From Which Rel	lief is Requested:	

All City of Emerson zoning cases require that taxes are current for the parcels for zoning consideration.

#### **Appearance/Representation at Commission Meeting Is Required**

To process this application the owner, applicant or a representative thereof <u>MUST</u> be present to personally request said zoning case before **the Planning Commission**.

Failure to personally appear at the scheduled meetings may result in denial of request, or an extended waiting period before the next available meeting.

Unless otherwise indicated, Planning Commission meetings are held at City Hall at 7:00 p.m. at 700 Hwy 293 Emerson, GA 30137.

Due to the possibility that a meeting may be postponed for various reasons, please call 770-382-9819 the day before any Planning Commission meeting to confirm its status.

The Planning Commission will hear your req	uest on:
to the best of my knowledge. I further und the planning commission may designate so its opinion, secure substantially the object conditions to be performed or met by the public health, safety, comfort, convenient including safeguards for, with respect to light	n and all attached information is true and correct derstand and agree that in granting any variance uch conditions in connection therewith as will, in ectives of these regulations and may designate e user or property owner, out of regard for the ence, and general welfare of the community, ght, air, areas of occupancy, density of population raffic plan, the future development of the city.
Signature of applicant	Date



## FINDINGS OF FACTS VARIANCE

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The Planning Commission may grant variances from zoning regulations in cases where strict application of such regulations would result in unnecessary hardship; but only in harmony with the spirit and intent of these regulations and is the minimum necessary to grant relief without injury to the public interest.

Please include as much detailed information or unique conditions that would enable the Planning Commission to make determination that:

1.	Because of the existence in good faith of a nonconforming use at a time prior to the adoption of the zoning ordinance or amendments thereto, requires the continuance of such nonconforming use:		
2.	What are extraordinary and exception conditions creating a <b>SUBSTANTIAL</b> hardship to the applicant which pertain to the particular piece of property or building because of its size, shape or topography:		
3.	How would the requested variance, if granted, not cause substantial detriment to the public good or impair the purpose or intent of the ordinance:		
4.	Provide evidence to support that the relief requested is the absolute minimum necessary.		



# ZONING ACTION OWNER AFFIDAVIT

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# THIS FORM MUST BE COMPLETED BY EACH OWNER OF THE PROPERTY. PROVIDE A COMPLETED AFFIDAVIT FOR EACH INDIVIDUAL OWNER.

Owners Name:

Address:	
Phone:	Email:
	(Owner's Name), personally
appeared before me, the undersi	gned officer, duly authorized to administer oaths in the State of
Georgia and having been duly s	worn, sets forth the following statements for the purpose of
making application for a zoning	action under the ordinances of City of Emerson, Georgia.
I affirm that I own the pr	roperty that is the subject of the attached application, as shown in
the records of Bartow County, C	Georgia.
I understand that represe	entation associated with this application on behalf of the owner(s)
(i.e. project managers, attorney,	agent, potential property owner or other such representative)
shall be binding.	
I respectfully petition th	nat this property as described in the attached application be
considered for a map amendmen	nt, conditional use permit or variance as requested.
FURTHER AFFIANT S	AYETH NOT.
I declare under penalty of	of false swearing that the above is true and correct.
This day of	
	(Owner's Signature)
Sworn to and subscribed before	me this
day of	
NOTARY PUBLIC	
My Commission Expires:	



### CAMPAIGN DISCLOSURE REPORT

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Has the applicant made, within two (2) years immediately preceding the filing of this application made a campaign contributions aggregating \$250 or more or made gifts having in the aggregate a value of \$250 or more to any member of the City Council, Planning and Zoning Commission or the Mayor who will consider the application?					
f YES, you and the attorney representing you must file this disclosure report with the Zoning Division at least five (5) days prior to the scheduled Public hearing.					
Please supply	y the following informatio	n, which will be considered a	s the required disclosure.		
DATE	GOVERNMENT OFFICIAL	DESCRIPTION	AMOUNT / VALUE (\$)		
certify that	0 0	is true and correct, this	day of		
		<del>-</del>			
Applicant Signature					

\*Applicant is defined as any individual or business entity (corporation, partnership, limited partnership, firm, enterprise, franchise, association or trust) applying for rezoning action and/or any attorney or other person representing or acting on behalf of a person who applies for a rezoning.



### ZONING SITE PLAN CHECKLIST

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PLEASE VERIFY EACH OF THE FOLLOWING ITEMS ARE SHOWN ON THE SITE PLAN.

	Exact boundary lines of the tract by bearings and distances determined by field survey.
	Name of property owner or owners of the subject property as stated on the most current or
	applicable title instrument and any adjacent property owners that are shown on the plan.
	Name of subdivision if property lies within a named subdivision or common development.
	Present zoning and zoning of abutting land.
	Exact locations, R/W widths, and names of all streets that immediately adjoin the
	subdivision.
	Abutting existing city streets or county roads showing existing right-of-way and pavement
	widths
	Show sidewalks on at least one side of the street.
	Common address and any lot numbers
	North arrow and graphic scale
	Date prepared
	Date of any revision
	Street layout with names
	All building setback lines shown with dimension label
	Locations of all existing or proposed buildings, entrances and parking
	Existing or proposed fencing and accessory structures
	Square footage for proposed structures
	Parking lot striping
	Existing or proposed lighting on or offsite.
	Landscaping (existing or proposed)
	The locations of all streams, wetland and floodplain boundaries
Pro	ovide a table with the following general site information:
	Parcel ID number
	Owner or Applicant Contact Information: Name, Address, Phone Number
	Proposed use of the property
	Total acreage for the entire property (acres)
	Total parking spaces
	Area of impervious surface (square feet or acres)
	Landscaped area (square feet or acres)
	Housing unit quantity or total square footage
	Confirmation of availability of all public utilities