



NEWNAN
GEORGIA

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 _____ Email: _____

Property Owner (Use back if multiple names) _____

Mailing Address _____

Telephone _____

Address/Location of Property _____

Tax Parcel No.: _____ 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Explain how conditions have changed that renders the future land use map designation invalid and no longer applicable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 and must also be furnished in digital, pdf format:

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 one survey (1) hard copy in an 18" x 24" format and one copy in a pdf digital file 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

***Regarding Community Impact Studies (when required), the applicant needs to contact the Planning department to request that staff initiate the will-serve letters to service providers at least 15 business days prior to filing the rezoning application. Additionally, the applicant must also provide a concept plan with the request.**

11. A Development of Regional Impact form shall be completed and submitted to the City if the request meets any of the criteria in §10-10 (b)(2)(h) on page 10-7 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
 - Mixed Use Application.....\$500.00/Plus Per Acre fee based upon proposed land use.
 - Planned Development Application.....\$500.00/Plus per Acre fee based upon proposed land use.
 - Overlay Zoning Application.....\$350.00

PLEASE NOTE: THIS APPLICATION MUST BE FILED BY THE 1st 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 Article 10 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 organizations¹ 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)

¹Business 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
- _____ Concept Plan
- _____ Preliminary Tree Management Plan (see attachment F for minimum plan elements)
- _____ 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)
- _____ Attachment E – Checklist
- _____ Attachment F – Preliminary Tree Management Plan
- _____ Attachment G - 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.



NEWNAN
CITY OF HOMES

City of Newnan
Attachment F

Preliminary Tree Management Plan Requirements...

- Label document as Preliminary Tree Management Plan.
- Provide a reasonable and legible representation of the Preliminary Tree Management Plan for review and comment.
- Graphic representation of the existing tree canopy.
- Written description and labeling information about the existing tree canopy.
- Total number of acres of the project.
- Total number of disturbed acres of the project.
- Total number of acres within any undevelopable areas, including utility easements, floodplain, wetlands, stream buffers, zoning buffers, lakes, ponds, etc...
- Graphic display and label any required or proffered zoning buffers. Provide acreage.
- Number of actual tree save acreage, not including any of the categories listed above.
- Provide detailed and graphic representation of all tree save areas and how tree save areas will be safeguarded and protected.
- Provide graphic representation of open space areas available for required tree plantings.

Please complete this form and email it to planning@newnanga.gov a minimum of 15 business days prior to filing the rezoning/annexation application.



Attachment G - Community Impact Study Form

(Required per Sec. 10-10(g), Article 10-Procedures and Permits)

Project Information

Project Name: _____

Project Address/Location: _____

Parcel ID(s): _____

Applicant/Developer: _____

Contact Information: _____

Date Submitted: _____

Project Description

Type of Development (check one):

Office (over 200,000 sq. ft.)

Commercial (over 250,000 sq. ft.)

Industrial (500+ employees)

Multifamily (over 150 units)

Gross Floor Area / Number of Units / Employees: _____

Narrative Summary of the Proposed Development:

Impact Analysis

1. Schools

Estimated number of new residents (if residential): _____

Projected school-age children generated: _____

Impacted school districts/facilities: _____

Capacity considerations: _____

Please complete this form and email it to planning@newnanga.gov a minimum of 15 business days prior to filing the rezoning/annexation application.

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2. Roads and Streets

Estimated average daily trips (ADT): _____

Peak hour traffic impact: _____

Adjacent street(s) affected: _____

Planned roadway improvements/mitigation:

3. Public Services

a. Police Services

Special service needs (if any): _____

b. Fire Protection

Distance to nearest station: _____

Special service needs (if any): _____

c. Sanitation Services

Estimated solid waste generation: _____

Disposal/management plans: _____

d. Taxes / Fiscal Impact

Estimated annual property tax revenue: _____

Estimated cost of public services: _____

Net fiscal impact: _____

e. Water Sewer

Sewer and water capacity to be determined by service provider.

Please complete this form and email it to planning@newnanga.gov a minimum of 15 business days prior to filing the rezoning/annexation application.

Please complete this form and email it to planning@newnanga.gov a minimum of 15 business days prior to filing the rezoning/annexation application.

Mitigation Measures

Describe any proposed improvements, contributions, or actions to reduce identified impacts: _____

Certification

I hereby certify that the information contained in this Community Impact Study is true and correct to the best of my knowledge.

Applicant Signature: _____

Printed Name: _____

Date: _____

Please complete this form and email it to planning@newnanga.gov a minimum of 15 business days prior to filing the rezoning/annexation application.