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DeKalbCountyGa.gov

Clark Harrison Building
330 W. Ponce de Leon Ave
Decatur, GA 30030

Chief Executive Officer
Michael Thurmond

DEPARTMENT OF PLANNING & SUSTAINABILITY

Director
Andrew A. Baker, AICP

**APPLICATION TO AMEND COMPREHENSIVE LAND USE PLAN
OF DEKALB COUNTY, GEORGIA**

Application No.: _____ Date Received: _____

Applicant's Name: _____ E-Mail: _____

Applicant's Mailing Address: _____

Applicant's Daytime Phone #: _____ Fax: _____

(If more than one owner, attach information for each owner as Exhibit "A")

Owner's Name: _____ E-Mail _____

Owner's Mailing Address _____

Owner's Daytime Phone # _____ Fax: _____

Address/Location of Subject Property: _____

District(s): _____ Land Lot(s): _____ Block(s): _____ Parcel(s): _____

Acreage: _____ Commission District(s): _____

Current Land Use Designation: _____ Proposed Land Use Designation: _____

Current Zoning Classification(s): _____

PLEASE READ THE FOLLOWING BEFORE SIGNING

- I. **This application form must be completed in its entirety. In addition, any application that lacks any of the required attachments or payment of the filing fee shall be determined to be incomplete and shall not be accepted.**
- II.
- III. **Disclosure of Campaign Contributions:** In accordance with the Conflict of Interest in Zoning Act, O.C.G.A., Chapter 36-67A, the following questions must be answered: Have you, the applicant, made \$250 or more in campaign contributions to a local government official within two years immediately preceding the filing of this application? _____ Yes _____ No
- IV.

If the answer is yes, you must file a disclosure report with the governing authority of DeKalb County showing:

- 1. The name and official position of the local government official to whom the campaign contribution was made.
- 2. The dollar amount and description of each campaign contribution made during the two years immediately preceding the filing of this application and the date of each such contribution.

The disclosure must be filed within 10 days after the application is first filed and must be submitted to the C.E.O. and the Board of Commissioners, DeKalb County, 1300 Commerce Drive, Decatur, Ga. 30030.

NOTARY

EXPIRATION DATE / SEAL

SIGNATURE OF APPLICANT
Check One: Owner _____ Agent _____

DATE

DEPARTMENT OF PLANNING & SUSTAINABILITY

As per Section 27-829 of the Zoning Ordinance of DeKalb County, each applicant seeking an amendment to the official Comprehensive Plan land use maps shall provide a complete written response to each of the following standards and factors for evaluation applications for amendments to the Comprehensive Plan land use maps:

1. Whether the proposed land use change will permit uses that are suitable in view of the use and development of adjacent and nearby property;
2. Whether the proposed land use change will adversely affect the existing use or usability of adjacent or nearby property;
3. Whether the proposed land use change will result in uses which will or could cause excessive or burdensome use of existing streets, transportation facilities, utilities, or schools;
4. Whether the amendment is consistent with the written policies in Comprehensive Plan Text;
5. Whether there are environmental impacts or consequences resulting from the proposed change;
6. Whether there are impacts on properties in an adjoining governmental jurisdiction in cases of proposed changes near county boundary lines;
7. Whether there are other existing or changing conditions affecting the use and development of the affected land areas which support either approval or denial of the proposed land use change;
8. Whether there are impacts on historic buildings, sites, districts or archaeological resources resulting from the proposed change.

DEPARTMENT OF PLANNING & SUSTAINABILITY

**LAND USE (FUTURE DEVELOPMENT) MAP AMENDMENT APPLICATION
AUTHORIZATION**

*Completion of this form is required if the individual making the request is **not** the owner of the property.*

DATE: _____

CHECK TYPE OF APPLICATION:

LAND USE MAP AMENDMENT

REZONE

MINOR MODIFICATION

SPECIAL LAND USE PERMIT

TO WHOM IT MAY CONCERN:

(I) / (WE), _____
(Name of owner(s))

being (owner)/(owners) of the property described below or attached hereby delegate authority to

(Name of Applicant or Agent Representing Owner)

to file and application on (my)/(our) behalf.

Notary Public

Owner

Notary Public

Owner

Notary Public

Owner