

404.371.2155 (o) 404.371.4556 (f) DeKalbCountyGa.gov

Chief Executive Officer Michael Thurmond

### **DEPARTMENT OF PLANNING & SUSTAINABILITY**

Director

Andrew A. Baker, AICP

## Special Administrative Permit (SAP)

# FARMERS MARKET

(Not a temporary produce stand)					
Address of Subject Property: _					
(If no address): District:	Land Lot:	Block:	Parcel:		
Applicant Name:					
Daytime Telephone No.:		E-mail:		-	
Permit Duration: (From) (See Table 4.30 (From) _	_// (To)(To)(	/ To)//	Total # Days: Total # Days:		
The application shall include:					
• Name and current address of	the applicant.				
• A notarized letter signed by t the placement of the farmers m			perty manager or agent, consenting to		
• A site plan/sketch drawn to-s	cale showing:				
• Property lines, street curbs,	street names, adjacer	nt sidewalks as app	blicable.		
• Plan layout and dimensions and size of the vending structure	0		ling the number, arrangement,		
• Location of onsite and offsit	e parking spaces.				
I,	agr	ree to abide by the	requirements of Art. 4.2.27 of the code.		
Applicant Signature		Date			
	SECTION BELOV	W TO BE COMPL	LETED BY OFFICE		
Zoning Classification:					
Staff Signature		Date			



### **DEPARTMENT OF PLANNING & SUSTAINABILITY**

### AUTHORIZATION

The property owner should complete this form or a similar signed and notarized form if the individual who will file the application with the County is not the property owner.

Date: \_\_\_\_\_

TO WHOM IT MAY CONCERN:

(I), (WE), \_\_\_\_\_

Name of Owner(s)

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

	Name of Applicant or Representative			
to file an application on (my), (our) behalf.				
Notary Public	Owner			
Notary Public	Owner			
Notary Public	Owner			
Notary Public	Owner			

1/20/2017