

Stewart County

P.O. Box 157, Lumpkin GA 31815. Phone: (229) 838-6769

Request to Amend the Zoning Map and Conditional Use Application

1. **Location/Address of Property:**

2. **Please Attach Legal Description of Property** (typed, double-spaced, metes and bounds description).

3. **Map and Parcel Number** (as shown on Tax Assessor's Map): _____

4. **Current Zoning Classification and Proposed Zoning Classification or Conditional Use Requested:**

5. **Current Use of Property:** _____

6. **Proposed Use of Property** _____

7. **Name, address, and phone number of property owner** (If applicant is not the property owner, please complete the authorization on the next page):

8. Name, address, and phone number/email of Applicant(s) (If different from property owner):

9. Posting of Sign: On _____ (date),
A Notification sign was posted in a conspicuous place on the property requested for rezoning, conditional use, or variance request.

10. Signature of Applicant: _____

Date Signed: _____

Authorization of Property Owner

I affirm that I am the owner, as shown in the records of the Stewart County, of the property which is the subject of the attached application.

I authorize the person listed as the applicant to pursue the rezoning of this property.

Signature of Owner(s): _____

Sworn to and subscribed before me this _____ day of _____, 20__.

Notary Public, County of _____

My Commission Expires: _____

For use by the Stewart County Only:

Date Application Accepted: _____

Amount Paid: _____

Payment Made Via: _____ Cash _____ Check _____ Visa/MC

Stewart County

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Rezoning and/or Conditional Use Application Instructions

1. **Location of Property:** Information listed here shall enable the property to be located on the ground with the aid of a map. Street names and addresses are usually sufficient.
2. **Legal Description of Property:** Written legal description. A full metes and bounds description is required (this information is normally found in the deed to the property).
3. **Map and Parcel Number:** Please refer to the tax maps maintained by the Quitman County Tax Assessor to obtain the map and parcel number.
4. **Zoning Classification - Current/Proposed:** The current zoning classification (obtained from the official zoning map) and the proposed zoning classification that the applicant feels is more appropriate than the current classification.
5. **Current Use of Property:** The property's existing land use.
6. **Proposed Use of Property:** The intended use of the property.
7. **Reason for Request:** A request to amend the zoning map or a conditional use request must have sound reasons that indicate why the current zoning should be changed or why the Conditional Use should be allowed. It is up to the applicant to make the case for the change.
8. **Name and address of property owner:** List the name and current address of all property owners.
9. **Name and address of Applicant:** If the applicant is not the property owner, list the name and address of all applicants.
10. **Posting of Rezoning Sign:** The sign must conform to the following specifications:
 - Sign Dimensions:** Not less than nine (9) square feet.
 - Sign Background Color:** The sign's background color must be white.
 - Sign Lettering:** The sign lettering must be black lettering at least 3-inches in height.

Wording of Sign: Please see following template:

NOTICE TO REZONE

Name of Applicant or Owner:
Present Zoning District:
Proposed Zoning District:
Proposed Use of Property:
**Date and Time of Stewart County Planning Commission
Public Hearing:**
**Date and Time of Stewart County Board of Commissioners
Public Hearing:**

BOTH PUBLIC HEARINGS WILL BE HELD AT Stewart County Courthouse

If the application is for a conditional use, the sign must read as follows:

NOTICE OF CONDITIONAL USE REQUEST

Name of Applicant or Owner:
Present Zoning District:
Proposed Use of Property:
**Date and Time of Stewart County Planning Commission
Public Hearing:**
**Date and Time of Stewart County Board of Commissioners
Public Hearing:**

BOTH PUBLIC HEARINGS WILL BE HELD AT Stewart County Courthouse

Signature of Applicant: The applicant must sign and date the application.

Authorization of Property Owner: If the application is made by someone other than the property owner, the "Authorization of Property Owner" section must be completed. The property owner(s) must sign the authorization and the section must be notarized.

Additional Information:

The fee for the rezoning application is \$50.00. If the fee is paid by check or money order, please make it payable to the "Stewart County." The fee is not refundable after the application has been submitted.

All applications must include a plat, drawn to scale, showing north arrow; land lot and district; and the dimensions, acreage, and location of the property. The plat must be prepared by an engineer or land surveyor whose state registration is current and valid. The engineers and land surveyor seal must be affixed to the plat.

No application will be processed until all items on the form have been completed to the satisfaction of the Stewart County.

The applicant or his/her appointed representative must be present at the Stewart County Planning Commission public hearing and the Stewart County Board of Commissioners public hearing.

DISCLOSURE STATEMENT FOR REZONING and CONDITIONAL USE CASES

Disclosure of Campaign Contributions (Required by Title 36, Chapter 67-A, OCGA)

All applicants and property owners of rezoning actions must file this disclosure with the County Clerk of Stewart County.

All opponents or proponents of a rezoning action must file this disclosure if contributions or gifts aggregating \$250 in value have been made to members of the Stewart County Board of Commissioners or Stewart County Planning Commission.

Reference Application filed on _____, 20____.
To rezone real property described as follows:

Please Check One:

Within the two years immediately preceding the above filing date, the applicant/opponent/ proponent (circle one) has made campaign contributions or given gifts aggregating \$250.00 or more to member(s) of the Stewart County Board of Commissioners or Stewart County Planning Commission of Lumpkin, Georgia (listed below) who will consider the rezoning application. List (1) the name of the local government official and (2) the dollar amount or gift value, description, and date of each such campaign contribution or gift:

Within the two years immediately preceding the above filing date, the applicant has made no Campaign contributions aggregating \$250.00 or more to member(s) of the Stewart County Board of Commissioners or Stewart County Planning Commission Lumpkin, Georgia who will consider the rezoning application.

I hereby depose and say that statements herein are true, correct, and complete to the best of my knowledge and belief.

Signature of Applicant or Person Opposing/
Supporting Rezoning

Date

- Teresa Thomas, Public Health Nurse Manager
- Kristi Bearden, Clerk 1
- Natalia Torres, Nutritionist
- Marilyn Powell, Health Service Tech
- Brad Carter, Environmental Health

Stewart County Health Department
 P O Box 307
 211 Health Department Rd.
 Lumpkin, GA 31815
 PH# (229) 838-4859
 Fax# (229) 838-6053

fax

TO: _____

FAX: _____ PAGES: _____

DATE: _____ FROM: STEWART COUNTY HEALTH DEPARTMENT

RE: _____

- Urgent
- For Review
- Please Comment
- Please Reply
- Please Recycle

Comments:

CONFIDENTIAL

The information contained in this facsimile message is intended for the sole confidential use of the designated recipients and may contain confidential information. If you have received this information in error, any review, dissemination, distribution or copying of this information is strictly prohibited. If you have received this communication in error, please notify us immediately by telephone and return the original message to us by mail or if electronic, reroute back to the sender. Thank you. If you do not receive all pages, please call the sender at the above number.

RECEIVED
 RECEIVED
 MAY 01 2016
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STEWART COUNTY COMMISSION

Building Inspection/Code Enforcement

Fax: 229-838-9856

P.O. Box 157

Phone: 229-838-6769

Lumpkin, GA 31815

BUILDING PERMIT APPLICATION

Application Date: _____

I hereby apply for a building permit and agree to conform to the agreements of the rules and regulations of the Stewart County Zoning Ordinance, Stewart County Building/Code Enforcement Official. **I understand that inspections are required and must be passed before I MAY OCCUPY THE STRUCTURE.** I agree the issuance of a new address is pending upon compliance. I also acknowledge that the property will be inspected by the Stewart County Tax Assessors Office personnel for the purpose of appraising any and all improvements upon the property. **STEWART COUNTY ASSUMES NO LIABILITY FOR DAMAGES OR UNSATISFACTORY WORKMANSHIP.**

I, _____, have legal access to this property.

Applicants Signature Date: _____

Clerks Signature Date: _____

First Inspection _____ Pass _____ Fail _____ Corrections _____
Second Inspection _____ Pass _____ Fail _____ Corrections _____
Third Inspection _____ Pass _____ Fail _____ Corrections _____
Final Inspection _____ Pass _____ Fail _____ Corrections _____
Septic Tank Approval _____ Skirting _____ Tiebacks _____
Landing _____ Setbacks _____ Electrical Inspection/Release _____
Energy Compliance _____

Approval Date _____ Denial Date _____

Comments: _____

Certificate of Occupancy Issue Date _____ Building Inspector Signature _____