Patricia Matthews
City Clerk,
City of Auburn
Planning & Development Department
1369 Fourth Avenue
P.O. Box 1059
Auburn, Georgia 30011
Phone: 770-963-4002 Fax: 770-513-9255
www.cityofauburn-ga.org

DATE RECEIVED_____

CASE FILE #: LUP _____

This form must be completed in its entirety before the Planning Director or his agent(s) accepts it. It must include the attachments and filling fees identified on the attachments. An application, which lacks any of the required attachments, shall be determined as incomplete and shall not be accepted.

DISCLOSURE OF CAMPAIGN CONTRIBUTION

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, within the last four-years immediately preceding the filing of this application, made campaign contributions aggregating $250.00 or more to a member of the Auburn City Council, a member of the Planning and Zoning Commission or a member of the Zoning Board of Appeals, a member of the Planning Department, or any other government officials who will consider the application?

_____YES _____NO

If yes, please complete the following section:

Name and Official Position of Government Official(s):

_____

_____

Please list the Date and the Amount of Contribution(s) (list all which aggregated $250.00 or more):

_____

_____

_____ Date: _____

Signature of Applicant

_____ Date: _____

Print Name

_____

Signature of Applicant's Attorney or Representative

_____

Print Name