



CITY OF AUBURN
COMMUNITY DEVELOPMENT DEPARTMENT
1369 4TH AVE, AUBURN, GA 30011
Phone: (770) 963-4002
www.cityofauburn-ga.org

SPECIAL USE PERMIT APPLICATION

CASE #: _____

GENERAL INFORMATION:

Applicant(s) :

Property Owner(s):

Address:

Address:

Phone:

Phone:

Email:

Email:

Property Address:

Tax Parcel # (s):

Size (acres): _____

Describe **in detail** proposed special use:

Existing Use(s) and structures of the subject property:

Surrounding Uses:

North: _____

South: _____

East: _____

West: _____

I hereby certify that the above information and all attached information is true and correct to the best of my knowledge:

Signature

Date



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AT A MINIMUM, THE FOLLOWING ITEMS ARE REQUIRED WITH THE SUBMITTAL OF THIS APPLICATION INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED.

PAYMENT OF FEE: Make checks payable to the City of Auburn.

Residential applications = \$850.00

Commercial applications = \$1000.00

SITE PLAN/SURVEY:

Three (3) copies of a recent survey (within 1 year) of the property prepared and stamped by a registered land surveyor, engineer, architect or landscape architect. The site plan shall be clearly legible and drawn at a scale of not less than 100' to 1" on a sheet size not to exceed 24"x36". Applicant shall also submit a reduced copy not to exceed 11" x 17" and a digital copy (pdf). The site plan shall show the existing and proposed locations of structures, driveways, parking and loading areas, location of environmental and zoning buffers, scale, north arrow, land lot/district, dimensions, current zoning, acreage, etc. The Director strongly encourages building elevation drawings/renderings be provided if applicable.

LETTER OF INTENT:

A letter written and signed by the applicant and/or owner describing **in detail** the special use.

CERTIFICATIONS:

Owner and/or agent certification form.

Owner and/or agent conflict of interest/disclosure of campaign contribution form

SUBMITTALS:

Submit the special use permit application, eight (8) copies of the site plan (folded to 8"x 11"), and all supporting documents to the Community Development Department: 1369 4th Avenue, Auburn, GA 30011.

*** COMPLETE APPLICATIONS MUST BE RECEIVED IN THE COMMUNITY DEVELOPMENT DEPARTMENT OFFICE BY NOON ON OR BEFORE THE 15TH OF THE MONTH PRIOR TO THE PLANNING COMMISSION PUBLIC HEARING SCHEDULED DATE. THE PLANNING COMMISSION MEETS ON THE 3RD WEDNESDAY OF EVERY MONTH.**

City of Auburn
Community Development Department
1369 4th Avenue, Auburn, GA 30011
770-963-4002
cityplanner@cityofauburn-ga.org



CASE #: _____

SPECIAL USE PERMIT APPLICATION

STANDARDS GOVERNING THE EXERCISE OF THE ZONING POWER

Pursuant to Section 17.17.20 of the City of Auburn Zoning Ordinance, the Auburn City Council shall consider factors relevant in balancing the interest in promoting the public health, safety, morals or general welfare against the right of the individual to the unrestricted use of property and shall specifically consider the following standards governing the exercise of the zoning power.

Please respond to the following standards in the space provided or use an attachment as necessary:

1. Whether a proposed special use permit will permit a use that is suitable in view of the use and development of adjacent and nearby property:

2. Whether a proposed special use permit will adversely affect the existing use or usability of adjacent or nearby property:

3. Whether the property to be affected by a proposed special use permit has reasonable economic use as currently zoned:

4. Whether the proposed special use permit will result in a use which will or could cause an excessive or burdensome use of the existing streets, transportation facilities, utilities, or schools:

5. Whether the proposed special use permit is in conformity with the policy and intent of the land use plan:

6. Whether there are other existing or changing conditions affecting the use and development of the property which give supporting grounds for either approval or disapproval of the proposed special use permit:

SPECIAL USE PERMIT APPLICANT’S CERTIFICATION

The undersigned below is authorized to make this application. The undersigned is aware that no application or reapplication affecting the same land shall be acted upon within 12 months from the date of last action by the City Council unless waived by the City Council. In no case shall an application or reapplication be acted up in less that six (6) months from the date of last action by the City Council.

Signature of Applicant

Notary Public

Date

Date and Seal



CASE #: _____

CERTIFICATIONS

In the event an owner's agent or contract purchaser is filing this application, both of the certifications below must be completed. If the owner is filing the application, only the owner's certification must be completed.

OWNER'S CERTIFICATION

The undersigned below, hereby declares that they are the owner(s) of the property, located at

_____ ,

as shown in the records of Barrow or Gwinnett County, GA.

Signature

Date

Appeared before me personally this

_____ day of _____, 20 _____.

Signature of Notary Public



CASE #: _____

CERTIFICATIONS

In the event an owner's agent or contract purchaser is filing this application, the certifications below must be completed. If the owner is filing the application, only the owner's certification must be completed.

AGENT'S CERTIFICATION

The undersigned below, or as attached, is hereby authorized to make this application by the property owner for the property listed above, which is the subject of this application.

_____ ,

as shown in the records of Barrow or Gwinnett County, GA.

Signature

Date

Appeared before me personally this

_____ day of _____, 20 _____.

Signature of Notary Public



CASE #: _____

CONFLICT OF INTEREST DISCLOSURE

The undersigned below, making application for Rezoning, Special Exception, Special Use Permit, Variance, etc., has complied with the Official Code of Georgia Section 36-67A-1, et. sec., Conflict of Interest in Zoning Actions, and has submitted or attached the required information on the forms provided.

Signature of Applicant

Signature of Owner

Date

Date

Appeared before me personally this
_____ day of _____, 20 _____.

Appeared before me personally this
_____ day of _____, 20 _____.

Notary Public

Notary Public

My Commission Expires: _____

My Commission Expires: _____

DISCLOSURE OF CAMPAIGN CONTRIBUTIONS

Have you, within the two years immediately preceding the filing of this application, made contributions aggregating \$250.00 or more to a member of the City Council, Planning Commission, Zoning Board of Appeals, or any other government officials who may consider this application?

(Check one) YES _____ NO _____ Your Name: _____

Name and position of government official(s):

Date and amount (which aggregated \$250.00 or more) of the contribution(s):

(Attach additional sheets if necessary to disclose or describe all contributions)

Signature of Applicant

Signature of Applicant's Attorney/Representative

Date: _____

Date: _____