



**Application to Amend Zoning Map  
City of Decatur, Georgia**

**Please type all information.**

**This application must be completed in its entirety before it is accepted. It must include all requested information, attachments, and filing fee. An application which lacks any of the requested information and/or required attachments shall be determined incomplete and shall not be accepted.**

Name of Applicant: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Telephone: \_\_\_\_\_

Name of Property Owner: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Telephone: \_\_\_\_\_

Address of property for which rezoning is sought:  
\_\_\_\_\_

Present zoning of property: \_\_\_\_\_

Present use of property: \_\_\_\_\_

Proposed zoning of property: \_\_\_\_\_

Proposed use of property: \_\_\_\_\_

**Fee: Please include a check in the amount of \$400 payable to the City of Decatur.**

**Disclosure of Campaign Contributions: In accordance with the Conflict of Interest Zoning Act, O.C.G.A., Chapter 36-67A-1, the following question must be answered:**

Have you, the applicant, made campaign contributions aggregating \$250 or more or made gifts having an aggregate value of \$250 or more to a local government official of the City of Decatur which will consider this application within two years immediately preceding the filing of this application? (Please check one of the following)

\_\_\_\_\_ **YES**      \_\_\_\_\_ **NO**

If the answer to the previous question is **YES**, you must file a disclosure report with the Development Department showing:

1. The name of the local government official to whom the campaign contribution or gift was made;
2. The dollar amount of each campaign contribution made by the applicant to the local government official during the two years immediately preceding the filing of the application for the rezoning action and the date of each such contribution; and
3. An enumeration and description of each gift having a value of \$250 or more made by the applicant to the local government official during the two years immediately preceding the filing of the application for the zoning change.

**The disclosure report must be filed within 10 days after the application is first filed.**

**Required Attachments:**

**(A)** Please provide a survey of the property and plan of the proposed development which contains the following information:

1. All property lines with dimensions.
2. Location of buildings or other structures, drainage courses, and easements.
3. Proposed street right-of-way lines.
4. Comprehensive site development plan if application is for commercial, industrial, high density single-family residential, multiple-family residential or institutional use.
5. North arrow, scale, land lot, block and lot numbers.

Provide one full-size copy of all plans, as well as one copy of all plans in an 8½” x 11” format. Floor plans and elevations of proposed building improvements should be included.

**(B)** Please provide a summary description of the proposed project, including number, height, floor area and proposed use of each building.

**(C) Standards Governing Zoning Decisions**

The following standards regarding a zoning proposal will be considered prior to recommendation by the Planning Commission and a final decision by the City Commission. Applicants for rezoning must submit a written answer and explanation for each standard with the rezoning application. Use additional sheets as necessary.

1. Does the zoning proposal permit a use that is suitable in view of the use and development of adjacent and nearby property?
2. Does the zoning proposal adversely affect the existing use or usability of adjacent or nearby property?
3. Does the property to be affected by the zoning proposal have a reasonable economic use as currently zoned?
4. Does the zoning proposal result in a use which will or could cause an excessive or burdensome use of existing streets, transportation facilities, utilities or schools?
5. Are there other existing or changing conditions affecting the use and development of the property which, because of their impact on the public health, safety, morality and general welfare of the community, give supporting grounds for either approval or disapproval of the zoning proposal?

**(D)** If the applicant is not the current property owner, please provide a notarized authorization for this application from the current property owner.

I hereby certify that the above and attached statements and documents are true to the best of my knowledge and belief.

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**Signature of Applicant**

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