

CHANGE IN CONDITIONS APPLICATION



Gwinnett County
Department of Planning & Development
Planning Division

446 West Crogan Street, Suite 250
Lawrenceville, Georgia 30046

(678) 518-6000

ONLY COMPLETE APPLICATIONS ACCEPTED

CHANGE IN CONDITIONS APPLICATION

AN APPLICATION TO AMEND THE OFFICIAL ZONING MAP OF GWINNETT COUNTY, GEORGIA

| APPLICANT INFORMATION | OWNER INFORMATION* |
|------------------------------------|-------------------------|
| NAME: _____ | NAME: _____ |
| ADDRESS: _____ | ADDRESS: _____ |
| CITY: _____ | CITY: _____ |
| STATE: _____ ZIP: _____ | STATE: _____ ZIP: _____ |
| PHONE: _____ | PHONE: _____ |
| CONTACT PERSON: _____ PHONE: _____ | |
| CONTACT'S E-MAIL: _____ | |

| APPLICANT IS THE: | | |
|---|---|---|
| <input type="checkbox"/> OWNER'S AGENT | <input type="checkbox"/> PROPERTY OWNER | <input type="checkbox"/> CONTRACT PURCHASER |
| ZONING DISTRICTS(S): _____ PRIOR ZONING CASE: _____ | | |
| LAND DISTRICT(S): _____ LAND LOT(S): _____ ACREAGE: _____ | | |
| ADDRESS OF PROPERTY: _____ | | |
| PROPOSED CHANGE IN CONDITIONS: _____ | | |

| RESIDENTIAL DEVELOPMENT: | NON-RESIDENTIAL DEVELOPMENT: |
|-------------------------------------|--------------------------------|
| NO. OF LOTS/DWELLING UNITS: _____ | NO. OF BUILDINGS/LOTS: _____ |
| DWELLING UNIT SIZE (Sq. Ft.): _____ | TOTAL GROSS SQUARE FEET: _____ |
| GROSS DENSITY: _____ | DENSITY: _____ |
| NET DENSITY: _____ | |

PLEASE ATTACH A LETTER OF INTENT EXPLAINING WHAT IS PROPOSED

CHANGE IN CONDITIONS APPLICANT'S RESPONSE
STANDARDS GOVERNING THE EXERCISE OF THE ZONING POWER

PURSUANT TO SECTION 1702 OF THE 1985 ZONING RESOLUTION, THE BOARD OF COMMISSIONERS FINDS THAT THE FOLLOWING STANDARDS ARE RELEVANT IN BALANCING THE INTEREST IN PROMOTING THE PUBLIC HEALTH, SAFETY, MORALITY OR GENERAL WELFARE AGAINST THE RIGHT TO THE UNRESTRICTED USE OF PROPERTY AND SHALL GOVERN THE EXERCISE OF THE ZONING POWER.

PLEASE RESPOND TO THE FOLLOWING STANDARDS IN THE SPACE PROVIDED OR USE AN ATTACHMENT AS NECESSARY:

- (A) WHETHER A PROPOSED CHANGE IN CONDITIONS WILL PERMIT A USE THAT IS SUITABLE IN VIEW OF THE USE AND DEVELOPMENT OF ADJACENT AND NEARBY PROPERTY:

- (B) WHETHER A PROPOSED CHANGE IN CONDITIONS WILL ADVERSELY AFFECT THE EXISTING USE OR USABILITY OF ADJACENT OR NEARBY PROPERTY:

- (C) WHETHER THE PROPERTY TO BE AFFECTED BY A PROPOSED CHANGE IN CONDITIONS HAS REASONABLE ECONOMIC USE AS CURRENTLY ZONED:

- (D) WHETHER THE PROPOSED CHANGE IN CONDITIONS WILL RESULT IN A USE WHICH WILL OR COULD CAUSE AN EXCESSIVE OR BURDENSOME USE OF EXISTING STREETS, TRANSPORTATION FACILITIES, UTILITIES, OR SCHOOLS:

- (E) WHETHER THE PROPOSED CHANGE IN CONDITIONS IS IN CONFORMITY WITH THE POLICY AND INTENT OF THE LAND USE PLAN:

- (F) 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 CHANGE IN CONDITIONS:

CHANGE IN CONDITIONS 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 BOARD OF COMMISSIONERS UNLESS WAIVED BY THE BOARD OF COMMISSIONERS. IN NO CASE SHALL AN APPLICATION OR REAPPLICATION BE ACTED UPON IN LESS THAN SIX (6) MONTHS FROM THE DATE OF LAST ACTION BY THE BOARD OF COMMISSIONERS.

Signature of Applicant

Date

Type or Print Name and Title

Signature of Notary Public

Date

Notary Seal

CHANGE IN CONDITIONS PROPERTY OWNER'S CERTIFICATION

THE UNDERSIGNED BELOW, OR AS ATTACHED, IS THE OWNER OF THE PROPERTY CONSIDERED IN 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 BOARD OF COMMISSIONERS UNLESS WAIVED BY THE BOARD OF COMMISSIONERS. IN NO CASE SHALL AN APPLICATION OR REAPPLICATION BE ACTED UPON IN LESS THAN SIX (6) MONTHS FROM THE DATE OF LAST ACTION BY THE BOARD OF COMMISSIONERS.

Signature of Property Owner

Date

Type or Print Name and Title

Signature of Notary Public

Date

Notary Seal

**VERIFICATION OF CURRENT PAID PROPERTY TAXES
FOR CHANGE IN CONDITIONS**

THE UNDERSIGNED CERTIFIES THAT ALL GWINNETT COUNTY PROPERTY TAXES BILLED TO DATE FOR THE PARCEL LISTED BELOW HAVE BEEN PAID IN FULL TO THE TAX COMMISSIONER OF GWINNETT COUNTY, GEORGIA. IN NO CASE SHALL AN APPLICATION OR REAPPLICATION FOR REZONING BE PROCESSED WITHOUT SUCH PROPERTY VERIFICATION.

*** NOTE: A SEPARATE VERIFICATION FORM MUST BE COMPLETED FOR EACH TAX PARCEL INCLUDED IN THE REZONING REQUEST.**

PARCEL I.D. NUMBER: _____ - _____ - _____
(Map Reference Number) District Land Lot Parcel

Signature of Applicant

Date

Type or Print Name and Title

TAX COMMISSIONERS USE ONLY

(PAYMENT OF ALL PROPERTY TAXES BILLED TO DATE FOR THE ABOVE REFERENCED PARCEL HAVE BEEN VERIFIED AS PAID CURRENT AND CONFIRMED BY THE SIGNATURE BELOW)

NAME

TITLE

DATE

CHANGE IN CONDITIONS CHECKLIST

The following is a checklist of information required for submission of a Change in Conditions application. The Planning and Development Department reserves the right to reject any incomplete applications.

- Application Form
- Boundary Survey
- Legal Description
- Site Plan (Four (4) copies and one (1) 8-1/2" X 11" reduction)
- Standards Governing Exercise of the Zoning Power
- Letter of Intent
- Applicant Certification with Notarized Signature
- Property Owner Certification with Notarized Signature
- Conflict of Interest Certification/Campaign Contributions
- Verification of Paid Property Taxes (most recent year)
- Application Fee – make checks payable to Gwinnett County

Additional Exhibits (if required):

- Additional site plan requirements for R-TH, R-ZT, Modified, CSO, OBP, HRR, R-SR, MUD or MUO rezoning requests
- Traffic Study
- Review Form for Development of Regional Impact
- Building Compliance Inspection

Please bring this checklist when filing for a Change in Conditions