

TOWN OF TYRONE
REZONING APPLICATION

PETITION TO THE TOWN OF TYRONE PLANNING COMMISSION AND TOWN COUNCIL
REQUESTING A REVISION TO THE OFFICIAL ZONING MAP
APPLICATION FOR REZONING MUST BE FILED BY THE PROPERTY OWNERS OR BY THE
AUTHORIZED AGENT OF THE PROPERTY OWNERS

Rezoning requests require a total of two (2) public hearings: one by the Planning Commission (4th Thursday of the month) and another public hearing by the Town Council. (3rd Thursday of the following month) Public hearings are held at the Tyrone Town Hall.

REZONING APPLICATION FILING FEES

(Based on number of acres to be rezoned)

0-5 Acres	\$500.00
6-10 Acres	\$1,000.00
11-20 Acres	\$1,500.00
21-100 Acres	\$ 2,000.00
101 or more Acres	\$ 2,500.00

Application filing fees may be refunded ONLY when an application request is withdrawn in writing by the applicant PRIOR TO placement of the legal advertisement for said public hearing request (at least 15 days before the scheduled Planning Commission public hearing)

APPLICATION TO AMEND
TOWN OF TYRONE ZONING

PROPERTY OWNERS: _____

MAILING ADDRESS: _____

PHONE: _____ FAX: _____

AGENT FOR OWNERS: _____

MAILING ADDRESS: _____

PHONE: _____ FAX: _____

PROPERTY LOCATION: LAND LOT _____ LAND DISTRICT _____ PARCEL _____

LAND LOT _____ LAND DISTRICT _____ PARCEL _____

TOTAL NUMBER OF ACRES REQUESTED TO BE REZONED: _____

EXISTING ZONING DISTRICT: _____ PROPOSED ZONING DISTRICT: _____

PRESENT USE OF SUBJECT PROPERTY: _____

PROPOSED USE OF SUBJECT PROPERTY: _____

LAND USE PLAN DESIGNATION: _____

NAME AND TYPE OF ACCESS ROAD: _____

LOCATION OF NEAREST WATER LINE: _____

(THIS AREA TO BE COMPLETED BY STAFF):

PETITION NUMBER: _____

Application Insufficient due to lack of: _____

Application and all required supporting documentation is Sufficient and Complete.

By Staff _____ Date _____

Date of Planning Commission Hearing: _____ Date of Town Council Hearing: _____

Received from _____ a check in the amount of \$ _____
For Application filing fee.

Date Paid: _____ Receipt # _____ Taken By _____

CHECKLIST OF ITEMS REQUIRED TO BE SUBMITTED FOR REZONING REQUEST.

Map amendment application. A map amendment (rezoning) application shall include the following:

_____ 1. A legal description of the tract to be rezoned;

_____ 2. Three (3) copies of a plat, drawn to scale, showing north arrow, land lot and district, the dimensions, acreage and location of the tract prepared by an architect, engineer, landscape architect or land surveyor whose state registration is current and valid. The preparer's seal shall be affixed to the plat;

_____ 3. The present and proposed zoning district for the tract;

_____ 4. Existing and intermediate regional flood plain and structures; III-2 (March 1, 2012 revision)

_____ 5. The names and addresses of the owners of the land and their agents, if any, and abutting land owners; and

_____ 6. A written, documented analysis of the impact of the proposed rezoning with respect to each of the following matters:

a. Whether the zoning proposal will permit a use that is suitable in view of the use and development of adjacent and nearby properties;

b. Whether the zoning proposal would adversely affect the existing use or usability of adjacent or nearby property;

c. Whether the property to be affected by the zoning proposal has a reasonable economic use as currently zoned;

d. Whether the zoning proposal will result in a use which will or could cause excessive or burdensome use of existing streets, transportation facilities, utilities or schools;

e. Whether the zoning proposal is in conformity with the policy and intent of the Comprehensive Land Use Plan; and

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 zoning proposal.

_____ 7. Disclosures. The applicant shall file all disclosures required by the Conflict of Interest in Zoning Actions Act, O.C.G.A. Title 36, Chapter 67A.

_____ 8. Application one (1) original and twenty (20) copies of completed application form.

PROPERTY OWNER CONSENT AND AGENT AUTHORIZATION FORM
(Application requires authorization by ALL property owners of subject property)

Name(s) of All Property Owners of Record found on the latest recorded Warranty Deed for the subject property

Please Print Names

Property Tax identification Number(s) of Subject Property: _____
(I am) (We are) the sole owner(s) of the above -referenced property requested to be rezoned. Subject property is located in the Land Lot(s) _____ of the _____ District, and (if applicable to more than one land district) Land Lot(s) of the _____ District, and said property consists of a total of _____ acres (legal description corresponding to most recent recorded plat for the subject property is attached herewith).

(I)(We) hereby delegate authority to _____ act as (my) (our) Agent in this rezoning. As Agent, they have the authority to agree to any and all conditions of zoning, which may be imposed by the Board.

(I)(We) certify that all of the information field with this application including written statements or showing made in any paper or plans submitted herewith are true and correct to the best of (my) (our) knowledge and belief. Further, (I) (We) understand that any knowingly false information given herein by me/us will result in the denial, revocation or administrative withdrawal of the application or permit. (I) (We) further acknowledge that additional information may be required by Fayette County in order to process this application.

Signature of Property Owner 1

Signature of Notary Public

Address

Date

Signature of Property Owner 2

Signature of Notary Public

Address

Date

Signature of Property Owner 3

Signature of Notary Public

Address

Date

NAME: _____

PETITION NUMBER: _____

ADDRESS: _____

PETITION FOR REZONING CERTAIN PROPERTY WITHIN THE TOWN LIMITS OF THE TOWN OF TYRONE.

_____ affirms that he is the owner or the specifically authorized agent of the property described below. Said property is located in a (n) _____ Zoning District. He/She respectfully petitions the Town to rezone the property from its present classification and tenders herewith the sum of \$ _____ to cover all expenses of public hearing. He/She petitions the above named to change its classification to _____.

This property includes: (Check one of the following)

See attached legal description on recorded Warranty Deed for subject property or

Legal Description for subject property is as follows:

PUBLIC HEARING to be held by the Town of Tyrone Planning Commission on the _____ day of _____, _____ at 7:00 p.m.

PUBLIC HEARING to be held by the Tyrone Town Council on the _____ day of _____, _____ at 7:00 p.m.

SWORN TO AND SUBSCRIBED BEFORE ME THIS _____ DAY OF _____, 20____.

NOTARY PUBLIC

APPLICANT'S SIGNATURE

AGREEMENT TO DEDICATE PROPERTY FOR FUTURE RIGHT-OF-WAY

I/We, _____ said property owner(s) of subject property requested to be rezoned, hereby agree to dedicate, at no cost to The Town of Tyrone,

_____ feet of right of way
along _____ as measured from the centerline of the road. Based on the Future Thoroughfare Plan Map streets have one of the following designations and the that the Town of Tyrone require a minimum street width as specified below:

Local Street (Minor Thoroughfare) 60 foot right-of-way (30' measured from each side of road centerline)

Collector Street (Major Thoroughfare) 80 foot right of way (40' measured from each side of road centerline)

Arterial Street (Major Thoroughfare) 100 foot right-of-way (50' measured from each side of road centerline)

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

Signature of Property Owner

Notary Public

Signature of Property Owner

**TOWN OF TYRONE
REZONING, VARIANCE, SPECIAL EXCEPTION APPLICATION**

The undersigned, making application for rezoning, variance, or special exception, has complied with the Official Code of Georgia Section 36-64A01, et seq., Conflict of interest in Zoning Actions and has submitted or attached the required information on the forms provided

Signature of Owner

Type or Print name and title

Signature of Owner's
Attorney or Representative

Type or Print name and title

Notary Public

Seal and expiration date

DISCLOSURE OR CAMPAIGN CONTRIBUTIONS

Have you, within the two years immediately preceding the filing of this application, made campaign, contributions aggregating \$ 250.00 or more to a member of the Tyrone Planning commission or member of the Tyrone Town Council?

_____ Yes _____ No

Signature of Applicant

If the answer is yes, please complete the following section

Name and Official Position of Government Official	Contributions(List all which aggregate to \$250.00 or more)	Date Contribution was made. (within the last 2 years)

Attach additional sheets if necessary to disclose or describe all contributions

Petition _____ Date Received: _____

PROPERTY OWNER CONSENT AND AGENT AUTHORIZATION FORM

(Application requires authorization by ALL property owners of subject property)

Name(s) of All Property Owners of Record found on the latest recorded Warranty Deed for the subject property

Please Print Names

Property Tax identification Number(s) of Subject Property: _____
(I am) (We are) the sole owner(s) of the above -referenced property requested to be rezoned. Subject property is located in the Land Lot(s) _____ of the _____ District, and (if applicable to more than one land district) Land Lot(s) of the _____ District, and said property consists of a total of _____ acres (legal description corresponding to most recent recorded plat for the subject property is attached herewith).

(I)(We) hereby delegate authority to _____ act as (my) (our) Agent in this rezoning. As Agent, they have the authority to agree to any and all conditions of zoning, which may be imposed by the Board.

(I)(We) certify that all of the information field with this application including written statements or showing made in any paper or plans submitted herewith are true and correct to the best of (my) (our) knowledge and belief. Further, (I) (We) understand that any knowingly false information given herein by me/us will result in the denial, revocation or administrative withdrawal of the application or permit. (I) (We) further acknowledge that additional information may be required by Fayette County in order to process this application.

Signature of Property Owner 1

Signature of Notary Public

Address

Date

Signature of Property Owner 2

Signature of Notary Public

Address

Date

Signature of Property Owner 3

Signature of Notary Public

Address

Date

Signature of Property Owner 4

Signature of Notary Public

Address

Date

