

SUBMITTAL CHECKLIST  
for  
**SPECIAL USE PERMIT APPLICATION**

- \_\_\_\_\_ 1. Complete **APPLICATION** with notarized signatures.
- \_\_\_\_\_ 2. Attach **DOCUMENTED IMPACT ANALYSIS** based on criteria outlined in application form.
- \_\_\_\_\_ 3. Obtain notarized **AUTHORIZATION(S) OF PROPERTY OWNER(S)**, if other than applicant.
- \_\_\_\_\_ 4. Attach **AUTHORIZATION OF ATTORNEY**, if an attorney is filing the application on behalf of a property owner.
- \_\_\_\_\_ 5. Attach a copy of a survey, ("plat of survey") and written legal description in metes and bounds. **Application will not be accepted without a survey and legal description in metes and bounds.**
- \_\_\_\_\_ 6. Attach fourteen copies of a site plan, folded to no greater than 11" x 14", drawn to scale, showing existing and proposed conditions including parking layout, utilities, driveways, and footprints of existing and proposed buildings, if applicable. Indicate north arrow, scale, and seal of professional preparer (see instructions, Item C).
- \_\_\_\_\_ 7. File application with Bureau of Planning Development Review Division.
- \_\_\_\_\_ 8. Pay fee. (See Attachment 3). Make check payable to "City of Atlanta".
- \_\_\_\_\_ 10. When you file the application, obtain copy of the **NOTICE TO APPLICANT** regarding the Zoning Review Board (ZRB) hearing date, meeting dates, the Neighborhood Planning Unit (NPU) contact person and the NPU meeting date.
- \_\_\_\_\_ 11. Consult with NPU contact person and attend necessary meeting(s), including any applicable neighborhood association meetings.
- \_\_\_\_\_ 12. Attend ZRB public hearing.

**NOTE: On closing day, applicants must sign in at the Bureau of Planning by 3:00 P.M. to ensure processing and scheduling for the corresponding public hearing date.**

**If the applicant signs in after 3:00, the application will be scheduled for the following month's public hearing (see attached public hearing schedule).**

If your application involves new construction, please identify the sewer and drainage basins for the subject property. This information is necessary to enable the Department of Public Works to certify sufficiency of sewer capacity during the application review process. You may contact the Bureau of Site Development (Dept. of Public Works) at (404) 330-6089 for assistance.

Please do not hesitate to contact the Bureau of Planning to discuss your application with a staff planner after filing your application. The staff recommendation for your application will be available on the Tuesday before the first ZRB hearing of the month.

# APPLICATION FOR SPECIAL USE PERMIT

City of Atlanta, Atlanta, Georgia

Date Filed \_\_\_\_\_ Application Number \_\_\_\_\_

I Hereby Request That The Property Described in this Application granted a Special Use Permit.

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

Last Name First Name MI

Address _____	Street Name _____
City _____	State _____ Zip Code _____
Phone _____	Fax _____

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

Last Name First Name MI

Address _____	Street Name _____
City _____	State _____ Zip Code _____
Phone _____	Fax _____

## Description of Property

Address of Property _____	Street Name _____
City _____	State _____ Zip Code _____
The subject property fronts _____ feet on the _____ side of _____	
beginning _____ feet from the _____ corner of _____	
Depth: _____	Area: _____ Land Lot: _____ District: _____ - _____ County, GA.
Property is zoned: _____ Council District: _____ Neighborhood Planning Unit: _____	

**A. SUMMARY OF PROPOSED PROJECT.** Describe the proposed project in the space provided below. Include the number, height, area, width, proposed use of each building. This description is in addition to the Documented Impact Analysis and is not considered a substitute.

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**B. DOCUMENTED IMPACT ANALYSIS.** Each application must contain a documented impact analysis of the impact of the proposed Special Use Permit with respect to the City of Atlanta Zoning Ordinance. This analysis should address the following matters:

- Ingress and egress to the property and proposed structure or uses thereon, with particular reference to automotive and pedestrian safety and conference, traffic flow and control, and emergency access.
- Off-street parking and loading areas, where required, with particular attention to the items above.
- Refuse and service area
- Appropriate buffering or screening to alleviate potential adverse effects as may be created by noise, glare, odor, lighting, signs, or traffic congestion.
- Hours and manner of operation
- Length of time regarding the duration of such permit, if any.
- Required yards and other spaces.

**C. PROCEDURAL REQUIREMENTS.** This application must be accompanied by detailed plans, showing exact lot dimensions, location and size of the buildings, structure or improvements to be placed on the site: the specific use of each building, structure, property or part thereof: detailed arrangement or required parking spaces, location and means of ingress and egress. Additional topographic information may be required where deemed necessary by the Zoning Administrator.

The plans shall be prepared, signed and sealed by the State of Georgia registered architect, engineer, landscape architect, or planner who holds membership in the American Planning Association, competent in preparation of detailed and accurate plans, drawn to scale. Said persons shall indicate on the plan their state registration number and shall certify that they are familiar with the City of Atlanta Zoning Ordinance, including revisions, and that to the best of their ability, these plans are accurate and comply with the general and district regulations of the rezoning ordinance.

**D. TREE PRESERVATION.** Applicants are reminded that Section 10-2041 through 10-2052 of the Code of Ordinances of the City of Atlanta provide for review of most new developments by the City of Arborist with respect to tree preservation. This ordinance should be reviewed by each applicant (copies may be obtained from the Office of the Clerk of City Council) to ascertain the conformity of the proposed Special Use.

**E. PROPERTY DESCRIPTION.** A copy of a recent plat of survey must be submitted. In cases involving more than one contiguous property, a consolidated legal description of the property must be submitted.

**F. HEARING DATES AND PROCESSING OF APPLICATION.** *See Zoning Review Board Schedule.*

**G. MEETING WITH NEIGHBORHOOD PLANNING UNIT. (NPU)** You must contact the appropriate Neighborhood Planning Unit (NPU) within two business days after filing your rezoning application to appear before them prior to the public hearing of the Zoning Review Board. The name and phone number of the contact for the NPU will be provided at the time of filing.

**H. FEES.** *See attached fee schedule, attachment 3.*

I hereby authorize the staff of the Bureau of Planning, Zoning Administration Division, to inspect the premises of the above described property. I hereby swear that all statements herein and attached statements submitted are true and correct to the best of my knowledge and belief.

\_\_\_\_\_  
Applicant or Agent of Application

Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 199\_\_.

\_\_\_\_\_  
Notary Public

**AUTHORIZATION BY PROPERTY OWNER**

I, \_\_\_\_\_ (OWNER'S NAME)

SWEAR AND AFFIRM THAT I AM THE OWNER OF THE PROPERTY AT \_\_\_\_\_  
\_\_\_\_\_ (PROPERTY ADDRESS).

AS SHOWN IN THE RECORDS OF \_\_\_\_\_ COUNTY, GEORGIA  
WHICH IS THE SUBJECT MATTER OF THE ATTACHED APPLICATION. I

AUTHORIZED THE PERSON NAMED BELOW TO ACT AS MY AGENT IN THE  
PURSUIT OF THIS APPLICATION.

**NAME OF APPLICANT**

LAST NAME \_\_\_\_\_ FIRST NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_ STREET NAME \_\_\_\_\_ SUITE \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

**TELEPHONE NUMBER**

AREA CODE ( ) NUMBER \_\_\_\_\_ - \_\_\_\_\_

\_\_\_\_\_  
Signature of Owner

\_\_\_\_\_  
Print name of owner

Personally Appeared Before Me this \_\_\_\_\_ day of \_\_\_\_\_, 199\_\_.

Who Swears That the Information Contained In this Authorization Is True and Correct to The Best of His or Her Knowledge and Belief.

\_\_\_\_\_  
Notary Public

\_\_\_\_\_  
Date

# AUTHORIZATION OF ATTORNEY

I SWEAR AND AFFIRM, AS AN ATTORNEY AT LAW, THAT I HAVE BEEN AUTHORIZED BY THE OWNER TO FILE A THE ATTACHED APPLICATION.

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SIGNATURE OF ATTORNEY

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NAME

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ADDRESS

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CITY

STATE

ZIPCODE

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TELEPHONE NUMBER

## FEE SCHEDULE

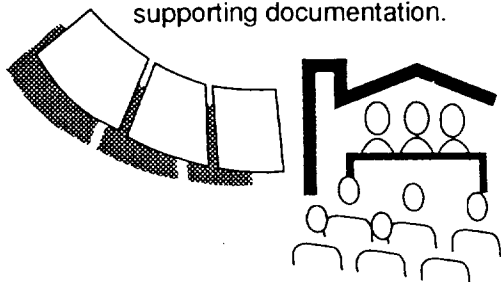
**A. REZONING APPLICATIONS.** Rezoning application fees shall be based on the zoning district for which an applicant applied and upon the size of the property for which the application is made to the following schedule:

1.) To R-1, R-2, R-2A, R-3, R-3A, R-4, R-4A, or R-4B	\$ 500.00 All Classifications
<b>2.) To R-5, RG, or PDH</b>	
1 acre or less	\$500.00
1+ to 5 acres	\$625.00
5+ to 10 acres	\$750.00
10+ acres	\$1250.00
<b>3.) To R-LC, O-1, C-1, C-2, C-4, C-5, I-1, &amp; or I-2</b>	
1 acre or less	\$1000.00
1+ to 5 acres	\$1500.00
5+ to 10 acres	\$2000.00
10+ acres	\$3000.00
<b>4) To C-3, PD-OC, PD-MU, or PD-BP</b>	
1 acre or less	\$3000.00
1+ to 5 acres	\$4500.00
5+	\$6000.00
<b>5) To any Special Public Interest (SPI) District</b>	\$3000.00
<b>6) No fee shall be charged for residential rezoning R-1, R-2, R-2A, R-3A, R-4, R-4A, R-4B, R-5, RG, PD-H when consistent with the Comprehensive Development Plan, (CDP).</b>	
<b>B. SPECIAL USE PERMITS</b>	\$400.00 All Classifications
<b>C. SITE PLAN AMENDMENT APPLICATIONS.</b> Site Plan Amendment fees shall be based on the zoning district in which the subject property is located and upon the size of the property for which the application for amendment is made according to the following schedule:	
1) In R-1, R-2, R-2A, R-3, R-3A, R-4, R-4B	\$500.00 All Classifications
<b>2) In R-5, RG, or PD-H</b>	
1 acre or less	\$500.00
1+ to 5 acres	\$625.00
5+ to 10 acres	\$750.00
10+ acres	\$1250.00
<b>3) In R-LC, O-1, C-1, C-2, C-4, C-5, I-1, or I-2</b>	
1 acre or less	\$1000.00
1+ to 5 acres	\$1500.00
5+ to 10 acres	\$2000.00
10+ acres	\$2500.00
<b>4) In C-3, PD-OC, PD-MU, or PD-BP</b>	
1 acre or less	\$2500.00
1+ to 5 acres	\$3250.00
5+	\$4000.00
<b>D. TRANSFER OF OWNERSHIP APPLICATIONS</b>	\$200.00 All Classifications
<b>E. COMPREHENSIVE DEVELOPMENT PLAN (COP) AMENDMENTS.</b> Applications for Rezoning or Site Plan Amendments that are deemed by the Bureau of Planning to require consideration by the City Council to change the Land Use Element of the COP shall require, in addition to fees stated elsewhere, an additional fee of \$1000.00	
<b>F. Transfer of Ownership Applications</b>	\$200.00

After consideration by the Bureau of Planning, the Neighborhood Planning Units, and the Zoning Review Board, the City Council may, by ordinance, amend the conditions or the official boundaries of a zoning district. This is known as a **Rezoning**.



Obtain application form from the Bureau of Planning. Complete and submit with fee and supporting documentation.

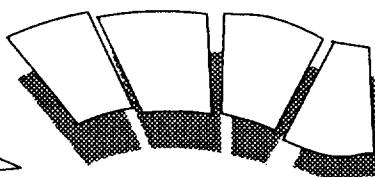
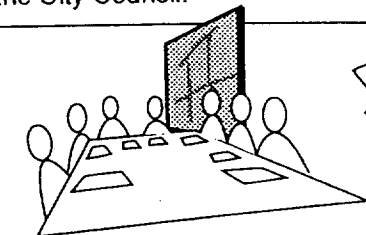


**NEIGHBORHOOD PLANNING UNIT (NPU)**

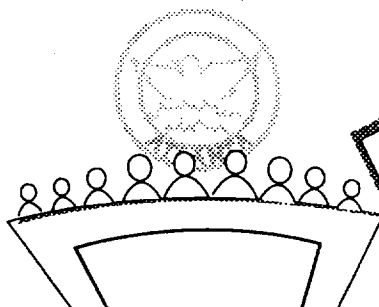
One of the 24 volunteer citizen advisory groups. Information to contact your designated NPU will be given when the application is submitted. The NPU will make a recommendation on your application. It is important to be present at the NPU meeting.

**ZONING COMMITTEE OF CITY COUNCIL**

Seven councilmembers who review proposed rezonings and forward advisory recommendations to the City Council.



**ATLANTA CITY COUNCIL**

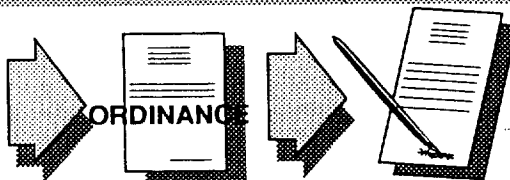


**ZONING REVIEW BOARD (ZRB)**

A nine-member citizen's committee appointed by the Mayor and confirmed by the City Council to hold public hearings and advise on amendment requests. The decisions are recommendations of approval or denial to the City Council. You or your representative **must** be present at the ZRB hearing.

The eighteen member City Council will vote on the proposed rezoning

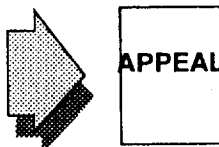
If **APPROVED** - the ordinance is transmitted to the Mayor. He may sign it, veto it, or allow it to become law without his signature. He has eight days to make a decision.



**ORDINANCE SIGNED INTO LAW BY MAYOR**

Applicant may apply for a building permit subject to any conditions imposed by Mayor and Council.

If **DENIED** - you must adhere to existing regulations. You may file an **APPEAL** to Fulton County Superior Court within 30 days after decision.



**REZONING OR SPECIAL USE PERMIT**

**CITY OF ATLANTA  
BUREAU OF PLANNING  
2001 ZONING REVIEW BOARD SCHEDULE  
6:00 P.M., CITY HALL, COUNCIL CHAMBER, SECOND FLOOR**

CLOSING DATE	ZONING REVIEW BOARD	ZONING COMMITTEE*	CITY COUNCIL
November 14, 2000	January 4, 2001 January 11, 2001	(January 30, 2001)	February 5, 2001
December 12, 2000	February 1, 2001 February 8, 2001	(February 27, 2001)	March 5, 2001
January 9, 2001	March 1, 2001 March 8, 2001	(March 27, 2001)	April 2, 2001
February 13, 2001	April 5, 2001 April 12, 2001	(May 15, 2001)	May 21, 2001
March 13, 2001	May 3, 2001 May 10, 2001	(May 29, 2001)	June 4, 2001
April 17, 2001	June 7, 2001 June 14, 2001	(June 26, 2001)	July 2, 2001
May 15, 2001	July 5, 2001 July 12, 2001	(July 31, 2001)	August 6, 2001
June 12, 2001	August 2, 2001 August 9, 2001	(September 11, 2001)	September 17, 2001
July 17, 2001	September 6, 2001 September 13, 2001	(September 25, 2001)	October 1, 2001
August 14, 2001	October 4, 2001 October 11, 2001	(October 30, 2001)	November 5, 2001
September 11, 2001	November 1, 2001 November 8, 2001	(November 27, 2001)	December 3, 2001
October 16, 2001	December 6, 2001 December 13, 2001	(January 15, 2002)	January 21, 2002

PATRICIA TINCH, LEGAL SECRETARY [330-6145]

**\*ZONING COMMITTEE DATES TO BE CONFIRMED**