



City of Covington

APPEALS APPLICATION

PLEASE COMPLETE THE BELOW INFORMATION. INCOMPLETE APPLICATIONS WILL BE RETURNED.

DECISION YOU ARE APPEALING:

Date Received: _____

Received By: _____

BOAA: _____

Process No.: _____

I. REQUIRED ITEMS:

The following items must be submitted as concurrent attachments to the application.

- Application fee in the amount of \$300.00 made payable to the City of Covington
- One (1) original signed application
- One (1) copy of the written decision which is the cause for the appeal
- One (1) copy of a letter of intent describing the rationale behind the appeal request
- One (1) copy of any additional plans or documents necessary to supporting applicant's request

II. PROPERTY OWNER:

Name: _____

Address: _____

Cell Phone: _____ Home Phone: _____

Email Address: _____

III. APPLICANT INFORMATION: (If different from property owner)

Name: _____

Address: _____

Cell Phone: _____ Home Phone: _____

Email Address: _____

IV. PROPERTY INFORMATION:

Property Address: _____

Tax Parcel ID: _____ Parcel Size: _____



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Existing Land Use: _____

Existing Zoning District: _____

V. PROPERTY OWNER(S) SIGNATURE:

VI. APPLICANT SIGNATURE:

VII. AUTHORIZATION FOR OWNER'S APPLICANT(S)/REPRESENTATIVES:

If Applicant is not the property owner, this section must be completed and notarized by a Notary Public.

I, _____, owner of the subject property identified in this application, do hereby authorize

_____ to act as my applicant/representative(s) in all matters pertaining to the processing and approval of this application including the modification of the project according to the terms and conditions set forth in the City of Covington. I agree to be bound by all representations and agreements made by designated representative.

Signature of current property owner: _____ Date: _____

Signature of Representative if appointed: _____ Date: _____

VIII. DISCLOSURE OF CAMPAIGN CONTRIBUTIONS:

O.C.G.A., Section 36-67A-3, requires that applicants shall submit all disclosures of campaign contributions.

Has property owner or applicant, within the two years preceding the date of this application, made campaign contributions or gifts aggregating \$250.00 or more, to a member of City Council, or a member of the Planning Commission? Yes No

If yes, please provide the following information:

Name and Official Position of Government Official	Contribution Amounts (list all which total to \$250.00 or more)	Date of Contribution(s)
_____	_____	_____
_____	_____	_____
_____	_____	_____



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IX. CONFLICT OF INTEREST CERTIFICATION:

The undersigned below, makes application for a variance, and has complied with the Official Code of Georgia Section 36-67A-1, et. Seq, Conflict of Interest in Zoning Actions, and submitted or attached required information on the forms provided. Title 36 relates to the disclosure of financial interests, campaign contributions, and penalties for violating the Official Code of Georgia.

Signature of property owner: _____ Date: _____

Signature of applicant or owner's representative(s): _____ Date: _____

Sworn to and subscribed to me this _____ Day of _____ 20__

Notary Public: _____

X. CERTIFICATION:

I, _____, the owner or authorized representative of the owner, have read and understand the contents of this application. I certify that the information contained herein, including attachments and all other supporting information, is complete and true, to the best of my knowledge and belief.

Signature of applicant or owner's representative: _____ Date: _____

Sworn to and subscribed to me this _____ Day of _____ 20__

Notary Public: _____