



City of Covington

CHANGE OF ZONING CONDITIONS APPLICATION

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

Date Received: _____

Received By: _____

CPC: _____

Process No.: _____

CURRENT ZONING DISTRICT: _____

CURRENT ZONING CONDITIONS: _____
Attached separately if needed

I. REQUIRED ITEMS:

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

- Application fee in the amount of \$500.00 made payable to the City of Covington
- One (1) original signed application
- One copy of a legal description with metes and bounds of the property. If there are multiple properties, each property must be combined into one legal description. If the properties are not contiguous, a separate application and legal description shall be submitted for each property
- One copy of a property survey (drawn to scale); on 11x17 paper, otherwise two (2) copies are necessary of larger than 11x17, and prepared by an architect, engineer, landscape architect or land survey or whose state registration is current and valid, showing:
 1. North arrow
 2. Land lot and district
 3. Tract location
 4. Dimensions along all property lines
 5. Acreage of the tract
 6. Street names and right-of-way dimensions of abutting streets
 7. Preparer's signature and seal affixed to the plat
- One Site Plan showing proposed layout of property, illustrating the following:
 1. Project name
 2. Property owner's name and contact information
 3. Date
 4. Scale
 5. North arrow
 6. Vicinity map
 7. Total acreage and net acreage
 8. Existing and proposed streets and right-of-ways
 9. Existing and proposed building locations
 10. Floodplain boundary
 11. Required setbacks and buffers
 12. Driveways
 13. Parking spaces
- One (1) copy of a Letter of Intent describing the rationale behind the proposed request to change conditions of zoning
- One (1) copy of any additional plan(s) necessary to supporting the applicant's request
- One (1) set of digital plans
- The property owner and applicant understand that additional conditions of zoning may be placed on the property in question by the Covington City Council as a result of submitting this application.



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II. **APPLICANT:**

Name:	
Mailing Address:	
Telephone:	Email:

III. **CURRENT PROPERTY OWNER:** (If different from the applicant)

Name:	
Mailing Address:	
Telephone:	Email:

IV. **PROPERTY INFORMATION:**

Property Address:	
Parcel Number(s):	Parcel Size:
Is the Future Land Use Map consistent with the proposed zoning:	

V. **PROPERTY OWNER(S) SIGNATURE:**

VI. **APPLICANT SIGNATURE:**



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AUTHORIZATION BY PROPERTY OWNER

I swear that I am the owner of the property that is the subject matter of the attached application, as shown in the records of Newton County, Georgia.

I authorize the person named below to act in my behalf in the pursuit of this Rezoning request.

Name of Agent: _____

Address: _____
City State Zip

Telephone Number (____) _____

Agent Signature

Signature of Owner

The above applicant personally appeared before me and swears the information contained in this authorization is true and correct to the best of his/her knowledge:

Witness

Notary Public

Date



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AUTHORIZATION OF ATTORNEY

I swear that as an Attorney at Law, I have been retained and authorized by the Owner of property located at: _____, to file the attached Rezoning Application.

Signature of Attorney

Name: _____

Address: _____

City State Zip

Telephone Number: (____) _____



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OWNER'S CAMPAIGN CONTRIBUTION DISCLOSURE STATEMENT

(To be completed by the owner of the property as it appears on Newton County Tax Records)

Owner(s): _____

Address: _____

Telephone Number: _____

_____ No, I have not made, within two (2) years immediately preceding the filing of this application, campaign contributions or gifts of \$250.00 or more to a local government official of the City of Covington, Georgia and

_____ I have not made campaign contributions or given gifts of any kind since the filing of this application.

_____ Yes, I have made, within two (2) years immediately preceding the filing of this application, campaign contributions or gifts of \$250.00 or more to a local government official of the City of Covington, Georgia.

_____ I have made campaign contributions and/or given gifts since the filing of the application.

(If yes, give the name and official position of the local government official to whom the campaign contribution was made, the dollar amount and description of each campaign contribution made by the applicant to the local government official during the two years immediately preceding the filing of the application and any contributions made since the filing of this application and the date each contribution was made.)

Owner's Printed Name: _____

Owner's Signature: _____ Date: _____

Owner's Printed Name: _____

Owner's Signature: _____ Date: _____

Notary's Printed Name: _____ Date: _____

Notary's Signature: _____ Expiration of Term: _____



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FINANCIAL DISCLOSURE STATEMENT

Property Owner and Proposed Property Address:

Does any member of the Mayor and Council or Covington Planning Commission have a property interest (direct or indirect, including any percentage of ownership less than total) in the subject property? Yes ___ No ___. If yes, please explain:

Does any member of the Mayor and Council or Covington Planning Commission have a financial interest (direct ownership interest of the assets or capital stock where such financial interest is ten percent (10%) or more) of a corporation, partnership, limited partnership, firm, enterprise, franchise, association, or trust, or have a property interest (direct or indirect ownership, including any percentage of ownership less than total) upon the subject property? Yes ___ No ___. If yes, describe the nature and extent of such interest:

Does any member of the Mayor and Council or Covington Planning Commission have a spouse, mother, father, brother, sister, son, or daughter who has a property interest as described above? Yes ___ No ___. If yes, please describe the relationship and the nature and extent of such interest:

I do hereby certify that the foregoing information is true and correct, this _____ day of _____, 20 _____.

Signature of Applicant

If any question above is answered "yes", then the member of the Mayor and Council, Board or Commission shall immediately disclose the nature and extent of such interest, in writing, to the Planning and Development Director. Also, a copy should be filed with the application. Such disclosures shall be public record and made available for public inspection during normal working hours.

Applicant means any person who applies for an appeal action and any attorney, or other person representing or acting on behalf of the person who applies for this decision.