

# CITY OF SUGAR HILL PUBLIC HEARING APPLICATION FOR ANNEXATION REZONING CHANGE OF CONDITIONS SPECIAL USE PERMITS



All applications are reviewed by the Planning and Development Department, the Planning Commission, and City Council.

- 1. An application is submitted to the Planning and Development Department. Applications are reviewed and approved by the Planning Director. Public Hearing dates are set based on when the application is accepted and compliance with the zoning procedures law are met in conjunction with regular meetings.
- 2. The Planning Director will review the application and make an Administrative Written Recommendation to the Planning Commission and City Council.
- 3. Legal notice is required to be printed in a newspaper of general circulation in Gwinnett County. This notice appears in the Gwinnett Daily Post at least 30 days before the date on which the public hearing is scheduled. The legal notice appears in the Sunday edition of the newspaper.
- 4. A public hearing sign is erected on the property at least 30 days before the public hearing. This sign will be erected by the City staff. The Planning and Development Department is also required to notify the adjoining property owner(s) of record 30 days before the Public Hearing.
- 5. The Planning Commission reviews the facts in the case at its scheduled public meeting, which is the third Monday of each month at 7:00 p.m. A recommendation is decided upon following the public hearing. This recommendation is forwarded to the City Council at its regular scheduled meeting.
- 6. The Mayor and City Council will discuss the details of the application at the Work Session on the First Monday of each month at 7:00 pm. The City Council meets on the Second Monday of each month at 7:30 p.m. and this is also a Public Meeting.
- 7. Once an application is filed, the applicant may withdraw the application without prejudice only before the legal advertisement of a public hearing is placed in a newspaper of general circulation in Gwinnett County. No application may be withdrawn under any circumstances after the legal advertisement of a public hearing has been placed. All applications advertised shall receive a final action by the City Council. Written notification of withdrawal is required.
- 8. If an application is withdrawn before placement of the legal advertisement, a refund of the application fee will be made, which will be prorated depending on how much of the application has been processed.
- 9. No application affecting land that has been denied a zoning map amendment, variance or special use permit shall be acted upon within 12 months from the date of the denial by the City Council unless waived by the City Council. A request to consider such a waiver is submitted to the City Council. In no case shall an application be acted upon in less than 6 months from the date of the denial by the City Council.
- 10. A change in the conditions of zoning approval will be processed as a new rezoning or special use permit application and will be subject to the required waiting period. All application requirements and fees will be the same as a rezoning or special use permit.
- 11. All applicants, their attorneys, or representatives, must submit information as required by the Official Code of Georgia Section 36-67A-1, et seq., Conflict of Interest in Zoning Actions.

The Planning Director requires pre-application conferences to discuss the proposal. Please contact staff to set up a meeting time.

NOTE: Digital copies of the application are now preferred. At your pre-application meeting, you will be given a contact to send the application to.



#### Required Items

- 1. APPLICATION FORM One (1) copy of the appropriate Application Form must be submitted to the Planning & Development Department. If there are multiple property owners, a MASTER application shall be submitted for the entire development and all property owners must also fill out separate applications. Separate applications are required for non-contiguous parcels. A separate application is required for each zoning classification requested (i.e. a development containing both RS-100/PRD and BG requires two applications) even if properties are contiguous. If the proposal is a "Development of Regional Impact" (DRI), a DRI Request for Review application including a traffic study and all supporting information and data must be submitted in addition to the application included in this packet.
- 2. APPLICATION FEE
- 3. LEGAL DESCRIPTION
- 4. <u>BOUNDARY SURVEY & SITE PLAN</u> May be combined as one sheet if applicable. The site plan should convey sufficient information to support your request, including but not limited to potential variances, buffer reductions, site layout, etc. This site plan must be submitted digitally for accurate evaluation. Blurry or otherwise unreadable site plans will not be accepted.
- 5. **LETTER OF INTENT**
- 6. **NOTARIZED SIGNATURES** The application form must have notarized signatures of both the property owner(s) of record and the applicant(s), or an attachment if multiple owners are involved.
- CONFLICT OF INTEREST, DISCLOSURE, & APPLICANT & OWNER RESPONSE/CERTIFICATION FORMS
   The conflict of Interest and Disclosure must be filled out by the Owner, Applicant and Applicant Representative if applicable.
- 8. **PROOF OF PAID PROPERTY TAXES** The applicant must provide proof that current property taxes have been paid on the land proposed for rezoning or special use permit.
- 9. **ELEVATIONS OF PROPOSED BUILDING(s)** If Applicable.
- 10. **ADDITIONAL EXHIBITS** (if required)



## **APPLICATION FEES**

For all ANNEXATION fees below INCLUDE applicable Annexation Fee <u>AND</u> applicable Rezoning Fee.

## **Annexation Fee**

Must include Rezoning Fee in addition to Annexation Fee

Residential - \$1,000.00

Commercial - \$500.00

## Rezoning/Change in Conditions/Special Use

Class 1 – AF, RS-200, RS-175, RS-150, RS-100, RS-72, R36, MH

1.0 Acre< \$350.00

1-5 Acres \$500.00

5-10 Acres \$1,000.00

> 10 Acres \$1,000.00 + \$30.00/Acre or any portion thereof after 10

acres

## Class 2 – OI, HSB, BG, LM, HM-1, HM-2

1-10 Acres \$500.00

10-15 Acres \$1,000.00

>15 Acres \$1,000.00 + \$50.00/Acre or any portion thereof after

15 acres w/

\$2,000.00 maximum.



Date Accepted:DATE REC	CEIVED:	
	APPLICA	TION
CHECK ONE:ANNEXATION/REZONING _	REZONING _	CHANGE IN CONDITIONSSPECIAL USE PERMIT
	APPLICANT INFO	RMATION
Name:		:
Phone:		
		·
Signature:	Date :	
	OWNER INFOR	MATION
IF MULTIPLE PROPERTY OWNERS FILE	L OUT MASTER APPLICA	ATION AND ONE APPLICATION FOR EACH APPLICANT.
Name:	Address:	
Phone:		
-		
Signature:	Date:	
	CONTACT INFOR	RMATION
Name:		e:
Email:		
* Include any person having a property interest and any person having a fi	inancial interest in any bus	siness entity having property interest (use additional sheets if necessary).
	PROPERTY INFO	RMATION:
IF MULTIPLE PROPERTY OWNERS FILL		ATION AND ONE APPLICATION FOR EACH APPLICANT.
Map Reference Number(s) (Tax Parcel Identification Number or PIN #) _		Acreage:
Number of Existing Housing Units: Number of Pro	posed Housing Units:	Current Population:
Street Address:		
PRESENT ZONING DISTRICT:	REQU	JESTED ZONING DISTRICT :
Proposed Development:		
Residential Development		Non-Residential Development
# of Lots/Dwelling Units:		# of Lots/Buildings:
Dwelling Unit Size (sq. ft.):		Total Gross Square Feet:
Net Density:	<u></u>	
PLEASE CHECK THE FOLLOWING IF APPLICABLE:	_DRI (Development o	f Regional Impact)Within 2,000 feet of the Chattahoochee River
Request for Special Conditions or Variance(s) (Set back, Parking,	, Buffers, etc):	

NOTE: Special Conditions, and Variance Request must also be explained in the Letter of Intent and shown on the site plan



## **APPLICATION FOR ANNEXATION**

# IF MULTIPLE PROPERTY OWNERS FILL OUT AND SUBMIT AN APPLICATION FOR EACH APPLICANT/OWNER/ELECTOR. SIGN APPLICABLE SECTION

**100% METHOD** 

owners, who own 100% of the property to be annexed, to have the follow or parcel of land lying and being in Land Lots(s)of the	is hereby made to the City of Sugar Hill, Georgia by the undersigned property ing described lands annexed into the corporate limits of the City. All that tract
number, subdivision name, and Plat Book Reference, if available, and the	ows:
available).	(Include a timetable for development if
Owner/Applicant Name:  Home Phone:  Work Phone:	Address:
	Email:
Signature:	Date Signed:
Owner/Applicant Name:  Home Phone:  Work Phone:	Address:
Signature:	Email: Date Signed:
Owner/Applicant Name:  Home Phone:  Work Phone:	
Signature:	Email: Date Signed:
Owner/Applicant Name:  Home Phone:  Work Phone:	Address:
Signature:	Email: Date Signed:
Owner/Applicant Name:  Home Phone:  Work Phone:	Address:
Signature:	Email: Date Signed:

<sup>\*</sup>COPY THIS PAGE FOR ADDITIONAL SIGNATURES, ORIGINAL SIGNATURES MUST BE SUBMITTED WTH THE APPLICATION.



## **APPLICATION FOR ANNEXATION**

# IF MULTIPLE PROPERTY OWNERS FILL OUT AND SUBMIT AN APPLICATION FOR EACH APPLICANT/OWNER/ELECTOR. SIGN APPLICABLE SECTION

#### **60% METHOD**

as: (Attach or Insert Legal description) illustrating the land area to be annexed and its relationship to the exis Book Reference, if available, and the existing zoning classifications of  () be assigned to for various portions of the property).	ors". Application operty propose epresent at least at tract or parcelliting City Limits adjacent property under the property un	on is hereby made to the City of Sugar Hill, Georgia by the d for annexation, to have the following described lands annexed at 60% of the owners of the property by acreage and at least 60% el of land lying and being in Land Lots(s) of the Gwinnett County, Georgia and being more particularly described (Note: Also, attach a plat or drawing Include lot number, block number, subdivision name, and Plat erties within the City.) It is requested that a zoning classification of upon annexation. (Note: Different classifications can be requested	
The property owner(s) intended to develop and/or use the property as		(Include a timetable for development if	
available).		\	
Landowner Name:	Address:		
Home Phone:	_		
Work Phone:	_		
	Email:		
Signature:		Date Signed:	
Elector (Registered Voter) Name:	Address:		
Home Phone:	_		
Work Phone:	_		
Signature:		Date Signed:	
Landowner Name:			_
Home Phone:			
Work Phone:	_	_	
	Email:		
Signature:		Date Signed:	
Elector (Registered Voter) Name:			
Home Phone:			
Work Phone:	_	_	
Signature:		Date Signed:	
Landowner Name:	Address:		_
Home Phone:			
Work Phone:	_	<del>-</del>	
	Email:	<del>-</del>	
Signature:		Date Signed:	
Elector (Registered Voter) Name:	Address:	<u> </u>	
Home Phone:	_		
Work Phone:	_		
Signature:	_	Date Signed:	

- COPY THIS PAGE FOR ADDITIONAL LANDOWNER AND ELECTOR SIGNATURES, ORIGINAL SIGNATURES MUST BE SUBMITTED WTH THE APPLICATION.
  - A SEPARATE SIGNTURE PAGE SHOULD BE FILED FOR EACH LANDOWNER AND EACH RESIDENT ELECTOR.



### **REZONING APPLICANT'S RESPONSE**

## STANDARDS GOVERNING THE EXERCISE OF THE ZONING POWER

Please respond to the following standards in the space provided or use an attachment as necessary:

A. Whether the proposed Rezoning or Special Use Permit will permit a use that is suitable in view of the use and development of adjacent and nearby property:
B. Whether the proposed Rezoning or Special Use Permit will adversely affect the existing use or usability of adjacent or nearby property:
C. Whether the property to be affected by a proposed Rezoning or Special Use Permit has reasonable economic use as currently zoned:
D. Whether the proposed Rezoning or Special Use Permit 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 Rezoning or Special Use Permit is in conformity with the policy and interest 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 Rezoning or Special Use Permit:



APPLICANT'S CERTIFICATION The undersigned below is authorized to make this application. The undersigned is aware that no application or reapplication which affects the same land for which an application was denied during the last 12 months shall be acted upon for 12 months from the date of the denial by the City Council unless waived by the City Council. In no case shall an application or reapplication be acted upon in less than six (6) months from the date of the denial by the City Council. Signature of Applicant Typed or Print Name and Title Sworn to and subscribed before me this \_\_\_\_\_day of \_\_\_\_\_ Signature of Notary Public PROPERTY OWNER'S CERTIFICATION The undersigned below is authorized to make this application. The undersigned is aware that no application or reapplication which affects the same land for which an application was denied during the last 12 months shall be acted upon for 12 months from the date of the denial by the City Council unless waived by the City Council. 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 City Council. I hereby authorize the staff of the City of Sugar Hill, Department of Planning and Development to inspect the premises which are subject of this zoning application. Typed or Print Name and Title Owner Signature Sworn to and subscribed before me this \_\_\_\_\_\_day of \_\_\_\_\_\_, 20\_\_\_\_\_. Signature of Notary Public CONFLICT OF INTEREST CERTIFICATION FOR REZONINGS The undersigned below, making application for rezoning, has complied with the Official Code of Georgia Section 36-67A-1, et seq., Conflict of Interest in Zoning Actions, and has submitted or attached the required information on the forms provided. Signature of Applicant/ Attorney Representative Date Typed or Print Name and Title Date Typed or Print Name and Title Signature of Owner Date Sworn to and subscribed before me this \_\_\_\_\_day of \_\_\_\_\_ DISCLOSURE OF 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 City of Sugar Hill City Council or the Planning Commission? \_\_\_\_\_(yes/no ). If yes, complete the following: NAME & OFFICIAL **CONTRIBUTIONS (List all** POSITION OF GOVERNMENT which aggregate to \$250 DATE CONTRIBUTION WAS **OFFICIAL** or more made (within last two years) Signature of Applicant/ Attorney Representative Date Typed or Print Name and Title Signature of Owner Date Typed or Print Name and Title Date Sworn to and subscribed before me this \_\_\_\_\_\_\_day of \_\_\_\_\_\_\_\_, 20\_\_\_\_\_. Signature of Notary Public



#### **VERIFICATION OF CURRENT PAID PROPERTY TAXES FOR APPLICATION**

The undersigned below is authorized to make this application. The undersigned certifies that all City Taxes/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, special use permit, and/or change in conditions be processed without such property verification. A copy of the paid tax bill can also be provided.

\*NOTE: A separate verification for must be completed for each tax parcel included in the Variance request.

Tax Parcel Number:

SIGNATURE OF APPLICANT

DATE

TYPE OR PRINT NAME