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**CHECKLIST FOR SUBMITTING REZONING REQUEST**

In order to have a request heard by the City Commission , the property owner(s) or agent for the owner(s) must file a complete application, in accordance with the City Zoning Ordinance. A complete application consist of the following:

- \_\_\_\_\_ APPLICATION FORM (attached)
- \_\_\_\_\_ APPLICATION FEE (see attached fee schedule) *\$ 200*
- \_\_\_\_\_ ACCURATE SURVEY, 3 COPIES
- \_\_\_\_\_ DEED, 2 COPIES
- \_\_\_\_\_ TAX MAP, 2 COPIES
- \_\_\_\_\_ GENERAL LAYOUT PLAN, 4 COPIES (see attached requirements)

Additional Information will be required for:

PLANNED COMMERCIAL  
PLANNED DEVELOPMENT  
RESTRICTED NEIGHBORHOOD COMMERCIAL

You may submit any additional material or information you may wish to, photographs of the site, signatures of support of surrounding property owners, etc. that you may want to submit.

City of Brunswick  
Building Officials  
700 Gloucester St.  
Brunswick, Ga. 31520  
(912) 267-5519

## INFORMATION ON HOW AN APPLICATION IS PROCESSED

Once a completed application is filed, an advertisement for a public hearing will appear in the Brunswick News, at least fifteen (15) days prior to the scheduled hearing, stating the date and place of the public hearing and the proposed request.

A sign will be placed on the subject property, at least fifteen (15) days prior to the scheduled hearings and the request. Notice of public hearing will be mailed to property owners of record within two hundred (200) feet of the property sought to be rezoned.

Following the Zoning Board of Appeals meeting, the recommendation will be forwarded to the City Board of Commissioners.

If the application is withdrawn after the City Commission has taken final action, there is a (6) month waiting period before resubmitting is allowed for any of the subject property involved in the request.

The request is then advertised for public hearing by the City Board of Commissioners, which is published in the Brunswick News, at least fifteen (15) days prior to the scheduled hearing.

If the application is denied by the City Board of Commissioners, an application shall not be initiated for an amendment/ request affecting the same parcel or parcels of property, or any part thereof, by a property owner or owners for a period of one (1) year.

## GENERAL LAYOUT REQUIREMENTS

A General Layout Plan shall be included with the application when requesting a change to the following zoning classifications:

General Commercial	Local Commercial
Limited Medical	Basic Industrial
Office Commercial	General Industrial
Highway Commercial	R-9
Limited Industrial	R-6
General Residential	Medical District

The General Layout Plan shall be at a scale of less than 1"= 100" containing the following:

- A) Dimensions of the property
- B) Location and dimensions of existing & proposed structure and use
- C) Access drives
- D) Setbacks
- E) Easements
- F) Right of way
- G) Marshland boundaries
- H) Proposed or existing water, sewer and drainage facilities
- I) Buffers
- J) Off- street parking
- K) Water courses and lakes
- L) Loading areas, signage and outdoor lighting (commercial/industrial)
- M) Recreational areas (multi-family )
- N) Proposed number of dwelling units and net acres )multi-family)

Requests for Planned Development, Planned Commercial and Restricted Neighborhood Commercial will require additional information as outlined in the zoning ordinance.

**CITY ZONING APPLICATION**

**APPLICATION  
NUMBER** \_\_\_\_\_

Reference Number/File \_\_\_\_\_

**REQUEST**

Existing Zoning \_\_\_\_\_

Use \_\_\_\_\_

Requested Zoning \_\_\_\_\_

Use \_\_\_\_\_

**PROPERTY OWNER (S)**

Name \_\_\_\_\_

Address \_\_\_\_\_

Telephone \_\_\_\_\_ (work and/or home) Fax \_\_\_\_\_

\_\_\_\_\_ Individual

\_\_\_\_\_ Partnership

\_\_\_\_\_ Sole Proprietor

\_\_\_\_\_ Firm

\_\_\_\_\_ Corporation

\_\_\_\_\_ Association

Corporation- Submit list of Officers, Directors and major stockholders name, address and title.

Partnership- Submit list of all partners name, address, and title.

**GENERAL INFORMATION**

Location or Legal Property Description \_\_\_\_\_

Property Address (GIS Approved) \_\_\_\_\_

Tax Map and Parcel Number \_\_\_\_\_ Zoning Plate Map \_\_\_\_\_

Size of Property \_\_\_\_\_

Property Frontage \_\_\_\_\_ Feet Paved or Unpaved \_\_\_\_\_

Public Water or Individual Wall ? \_\_\_\_\_

Public Sewer or Individual Septic Tank? \_\_\_\_\_

**REASON FOR REQUEST**

Would be in harmony with the neighborhood because:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Would not be detrimental to property or persons in the area because:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Other comments:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**DISCLOSURE**

Identify all Members of the City Board of Commissioners, Zoning Board of Appeals and Employees of City of Brunswick Community Development  
Who:

- (1) Has a property interest in the real property affected by this request
- (2) Has a financial interest (direct ownership interest of the total assets or capital stock of a business entity where such ownership interest is more than 10%) in any business entity which has a property interest in the real property affected by the request
- (3) Has a member of the family (spouse, mother, father, brother, sister, or daughter) having property financial interest as herein defined, in the real property affected by the request.

**SIGNATURES**

I/we the owner(s) of the property involved in this application do hereby authorize the following person to act as agent on my/our behalf.

Agent Information: \_\_\_\_\_

Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Fax: \_\_\_\_\_

I/we the owner(s) submit this application and certify that the information is correct and true to the best of my knowledge.

Signature of Owner(s)

\_\_\_\_\_