INSTRUCTIONS FOR FILING A REZONING APPLICATION

Polk County, GA Government

Completed applications must be submitted to the Polk County Planning & Zoning Office, located at 5 Warehouse Street, Cedartown, GA 30125. Please contact 770-749-2104 if you have any questions.

Requirements

1. **Completed Application:** The application must be completely filled out and include all signatures. If an individual is serving as a representative for a rezoning request, both the owner and representative's signatures are required. The application and all associated documents must be submitted no later than the establishing filing deadline date. Associated documents should include:
    a. Existing conditions of property;
    b. Proposed conditions of property or project;
    c. Boundary survey/plat including metes and bounds description;
    d. Appropriate site plans, if applicable.

2. **Campaign Disclosure:** The Campaign Disclosure Report for Zoning Actions must be included with the application.

3. **Filing Fee:** A non-refundable filing fee of **$400** must accompany the application.

Meetings will be held at the Polk County Board of Commissioners meeting room, located at 73 Cline Ingram Jackson Road, Cedartown, GA 30125.

Rezoning Application

Applicant: _____ **Phone #:** _____

Address: _____

E-mail: _____

Property Information

Property Address: _____

Tax Parcel #: _____ **Acreage:** _____

Current Zoning: _____ **Proposed Zoning:** _____

Reason for Rezoning Request:

_____

_____

Certification

1. A non-refundable application fee of $400 that covers staff review, public hearing notices, and sign postings on the property. The applicant must also be present for Planning Commission and Board of Commissioners meetings pertaining to the rezoning request.

   I certify that all of the above information is true and accurate. I further certify that I am the owner of the property or have been granted permission by the current property owner to serve as a representative for this application.

   _____ _____
   Property Owner Signature Representative Signature (if applicable)

   _____ _____
   Notary Date

County Use Only

Planning Commission Date: _____ **Board of Commissioners Date:** _____

Case Number: _____

CAMPAIGN DISCLOUSRE REPORT
FOR ZONING ACTIONS

I certify that **I HAVE** _____ **I HAVE NOT** _____ within the past two (2) years made a campaign contribution in the amount of $250 or more to any member(s) of the Polk County Board of Commissioners or any official who will consider this application.

If applicable, please list the name(s) and position of officials of which a contribution was made during the two (2) years immediately preceding this application. Please also list the name(s) and position of any commissioner or official that has any personal or financial interest in the subject property of this application.

Name of Official	**Amount**	**Date of Contribution**
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Other	**Type of Interest**
_____	_____
_____	_____
_____	_____
_____	_____

_____ _____

Signature Date