



File # _____

Variance Application

Applicant Information	Applicant _____ Mailing address _____ City _____ State _____ Zip _____ Telephone (____) _____ Fax (____) _____
Property Ownership	Property Owner(s) _____ Mailing address _____ City _____ State _____ Zip _____ Telephone (____) _____ Fax (____) _____
Contact Person	Contact Person(s) _____ Mailing address _____ City _____ State _____ Zip _____ Telephone (____) _____ Fax (____) _____ E-mail _____ <p style="text-align: center;">* All staff correspondence will be sent only to one designated contact person. * Addresses and telephone numbers do not have to be repeated if provided above.</p>
Request	Location address _____ Current Zoning _____ Present use _____ Purpose of the Variance request. Describe those things, which you feel justify the action requested. List the specific sections of the Zoning Ordinance which have a bearing on your request: _____ _____ _____ _____ _____

VARIANCE APPLICATION

*** This application will not be processed unless the following items are submitted ***

Filing Requirements

- Filing fee (see scheduled fees). Make checks payable to the City of Pooler.
- A survey of the property signed and stamped by a State of Georgia Certified Land Surveyor.
- Site plan and/or architectural rendering of the proposed development depicting the location of lot restrictions.
- Submit one copy if 11" x 17" or smaller, 16 copies if larger.
- Signed and dated Campaign Contributions and acceptance of Variance Standards form.
- Authorization of property owner signed, dated and notarized.

Adjacent Property Owners

Name, address & zip codes of surrounding property owner's primary residence within a radius of 200 ft. of the property as of the date of filing. Include those directly across a public right-of-way. Use additional sheet, if necessary.

Campaign Contributions

Have you made campaign contributions to one or more Pooler City Official(s), including any member(s) of the Planning Commission, during the past two years that when combined, total an amount greater than \$250.00?

- No. I have not made campaign contributions to any Pooler City Official(s).
- Yes. I have made campaign contributions to one or more Pooler City Official(s).

City Official	Title	Dollar Value	Description of gift

If more space is needed for campaign contributions attach another copy of this form.

Signature & Date

I attest that all the information provided is true to fact: _____
(Applicants Signature)

Date: ___/___/___

Attest: _____
(Zoning Administrator or Agent thereof)

Application Status

This portion to be completed by Zoning Administrator

- Hearing date has been set for: _____
- Notice published in newspaper on: _____ (15 days prior to hearing date)
- Letters of notification mailed to adjacent property owners on: _____
- This action was approved _____ or denied _____ (copy of minutes disposing of this action attached)
- Notification of the results of this action mailed to applicant on: _____

City of Pooler

AUTHORIZATION OF PROPERTY OWNER

Application for Rezoning, Conditional Use, Variance, Site Plans & Subdivision Submittals

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

I authorize the person named below to act as applicant in the pursuit of a variance, conditional use, rezoning of property or a site plan submittal.

Name of applicant: _____

Address: _____

City & State: _____ Zip _____

Telephone number: _____

Signature of owner

Personally appeared before me _____

Who swears that the information contained in this authorization is true and correct to the best his/her knowledge and belief.

Notary Public

Date