



File # \_\_\_\_\_

# Conditional Use Application

<b>Applicant Information</b>	Applicant _____ Mailing address _____ City _____ State _____ Zip _____ Telephone (____) _____ Fax (____) _____
<b>Property Ownership</b>	Property Owner(s) _____ Mailing address _____ City _____ State _____ Zip _____ Telephone (____) _____ Fax (____) _____
<b>Contact Person</b>	Contact Person(s) _____ 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>
<b>Request</b>	Location address _____ Current Zoning _____ Present use _____ Provide a brief description of proposed use on subject property. 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: _____ Description of the activities, # of units and hours of operation of the proposed conditional use: _____ A proposed starting date of land disturbance or construction, date of completion for all improvements and use opening or date of first occupancy: _____ A list of activities undertaken by the developer and subsequent occupant to mitigate all adverse impacts upon the surrounding properties before, during and after the completion of development activities: _____ _____ _____

# Conditional Use Application (CONT.)

\* This application will not be processed until **ALL** of the following items are submitted \*

- Filing Requirements**
- Filing fee (see scheduled fees). Make checks payable to the City of Pooler.
  - A preliminary site plan which includes items (1),(2), (3) and (6) of Appendix A, Article V, Section 4 (c)
  - A list of activities undertaken by the developer and subsequent occupant to mitigate all adverse impacts upon the surrounding properties before, during and after the completion of development activities.
  - Submit one copy if 11" x 17" or smaller, 16 copies if larger.
  - Signed and dated Campaign Contributions and acceptance of conditional standards.
  - Authorization of property owner signed, dated and notarized. (page 3)

**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 an additional sheet if necessary. ***(Required)***

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**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). ***(Please sign below at the \* )***

\* Yes. I have made campaign contributions to one or more Pooler City Official(s). ***(Please sign below at the \* )***

City Official	Title	Dollar Value	Description of gift

\* **Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

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: \_\_\_\_\_
- Sign Posted: \_\_\_\_\_

# *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.

*and/or*

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 Date

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



# Conditional Use Standards

## Review Criteria

- *The planning commission shall hear and make recommendations upon such uses in a district that are permitted as conditional uses. The application to establish such use shall be approved by the city council on a finding that:*
  1. The proposed use will not be contrary to the purpose of this ordinance,
  2. The proposed use will not be detrimental to the use or development of adjacent properties or the general neighborhood or adversely affect the health and safety of residents and workers,
  3. The proposed use will not constitute a nuisance or hazard because of the number of persons who will attend or use such facility, vehicular movement acquainted with the use, noise or fumes generated by or as a result of the use, or type of physical activity associated with the land use,
  4. The proposed use will not be affected adversely by the existing uses of adjacent properties,
  5. The proposed use will be placed on a lot which is of sufficient size to satisfy the space requirements of said use,
  6. The parking and all development standards set forth for each particular use for which a permit may be granted will be met; **and**,
  7. The action will not adversely impact adjacent or nearby properties in terms of property values, by rendering such properties less suitable and therefore less marketable for the type of development to which they are committed or restricted in order to promote the public welfare and protect the established development pattern.

## Additional Mitigation Requirements

- The Planning Commission may suggest and the Mayor and Council may impose or require such additional restrictions and standards (e.g., increased setbacks, buffer strips, screening, etc.):
  1. As may be necessary to protect the health and safety of workers and residents in the community; and
  2. To protect the value and use of property in the general neighborhood.

If you have any questions concerning this information please contact Kim Classen @ (912) 748-7261 or [kclassen@pooler-ga.gov](mailto:kclassen@pooler-ga.gov)

\_\_\_\_\_ Applicant/Owner initial as received