



Zoning Text Amendment Application

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Updated **SEPT 2023**

NOTICE TO APPLICANT

Applications must be received thirty at least thirty (30) days prior to the regularly scheduled meeting on the second and fourth Monday of each month (unless otherwise noted). There is a filing fee of \$350.00. Checks may be made payable to the City of Pooler. Attach additional typed or printed sheets if necessary to fully answer any of the questions.

OFFICE USE ONLY

Date Received: _____ File Number: _____

Hearing Date: _____ Publication of Notice: _____

Action Approved Action Denied (copy of minutes disposing of this action are attached)

General Information

Owner/Authorized Agent Name _____ Phone _____

Address _____ Email _____

Have any previous applications been made for a text or map amendment affecting these same premises? Y N

If yes, provide file number, date, and action taken: _____

(If exact file number, date, or action is not known, please give approximate date of previous application.)

Action Requested

Is action request a text amendment change? Y N

Articles and Subtitles/Sections to Which the Change/Amendment Will Apply _____

Present Wording of Ordinance:

Proposed Wording of Ordinance:



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Reasons & Certifications

List all reasons for requesting change which would support the purposes of the zoning program:

Affidavit

I have received and understand the list of actions required to amend the City of Pooler Code of Ordinances.

I understand the standards and any other factors relevant to promoting the public health, safety, and general welfare of the City of Pooler against unrestricted use of property will be considered, when deemed appropriate, by the aldermanic board in making any zoning decision.

I hereby certify that the above stated facts are true to the best of my knowledge, and that I am the Owner or Authorized Agent for the Owner of subject property.

Owner/Agent Name

Owner/Agent Signature

Date

Notary Public

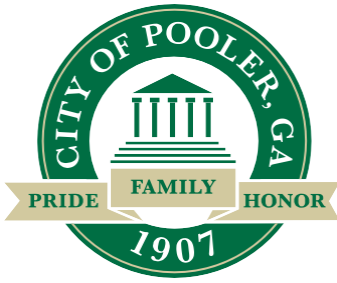
Subscribed and Sworn This Day Of

Notary Name

Notary Signature

Commission Expiration

Seal



Zoning Map Amendment Standards

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Section 10. Standards for Zoning Ordinance or Map Amendment

In order to promote the public health, safety, and general welfare of the City of Pooler against the unrestricted use of property, the following standards and any other factors relevant to balancing the above stated public interest will be considered, when deemed appropriate, by the aldermanic board in making any zoning decision:

1. Is this request a logical extension of a zoning boundary which would improve the pattern of uses in the general area?
2. Is this spot zoning and generally unrelated to either existing zoning or the pattern of development of the area?
3. Could traffic created by the proposed use or other uses permissible under the zoning sought traverse established single-family neighborhoods on minor streets, leading to congestion, noise and traffic hazards?
4. Will this request place irreversible limitations on the area as it is or on future plans for it?
5. Is there an imminent need for the rezoning and is the property likely to be used for the use requested?
6. Will the proposed use substantially conflict with existing density patterns in the zone or neighborhood?
7. Would the proposed use precipitate similar requests which would generate or accelerate adverse land use changes in the zone or neighborhood?
8. Will the action adversely impact adjacent or nearby properties in terms of:

Environmental quality or livability resulting from the introduction of uses or activities which would create traffic, noise, odor or visual hazards or the reduction of light and air that is incompatible with the established development pattern?

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?

Will the action create development opportunities of such increased intensity that storm water runoff from the site cannot be controlled within previous limits, with [which] results in adverse impacts upon existing down-stream drainage problems or potential problems?

9. Will the action result in public service requirements such as provision of utilities or safety services which because of the location or scale of the development, cannot be provided on an economic basis and therefore would create an actual burden to the public?

Affidavit of Receipt

I understand the importance of this document and acknowledge that this affidavit serves as a formal record of my receipt of the document.

Applicant Name

Applicant Signature

Date



Property Owner Authorization

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Authorization

Completion of this form is required for all Rezoning, Conditional Use, Variance, Site Plan, and Subdivision applications.

Rezoning Conditional Use Variance Site Plan Subdivision

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

Applicant/Agent Name

Email

Phone

Applicant/Agent Address

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 that the information contained in this authorization is true and correct to the best of my knowledge and belief.

Property Address

Owner Name

Owner Signature

Date

Notary Public

Subscribed and Sworn This Day Of

Notary Name

Notary Signature

Commission Expiration

Seal