



Clayton County Planning & Zoning Department of Community Development

121 South McDonough Street
Jonesboro, GA 30236
Office: 770.477.3569 Fax: 770.473.5481
Web site: www.co.clayton.ga.us

VARIANCE INSTRUCTIONS, APPLICATION & CHECKLIST

Procedure for Variance Application:

1. Application:

- Monthly submittal deadline: All applications must be complete and submitted in accordance with the adopted Board of Zoning Appeals Schedule.
- Variance Considerations: The Board of Zoning Appeals may grant a variance from Development Standards (see Section 10.8) and shall not grant a use variance (see Section 10.9).
- Submittal requirements: **Completed** application, fees and supporting documentation, including but not limited to the checklist items provided within this instruction packet.
- Notice to Interested Parties: **Applicant** must inform surrounding parcel owners **in writing** that a variance request has been submitted, **15 days prior** to public hearing.
- Department of Community Development staff provides applicant the address of the parcel owners surrounding properties **within 200 feet** of subject property, or within two (2) parcels, within two (2) days of submittal (whichever is greater).
 - **Applicant provides proof of mailing** – certificate of mailing or certified mail receipt – to Zoning Administrator at least seven (7) business days **prior to public hearing**.
- The letter must state the same information as the legal ad (see Instructions, attached). Failure to provide proof will lead to a tabling or postponement of applicant and will be moved to the following month's hearing cycle. Note your submittal date for mailing proof: _____

2. Staff Report and Board of Zoning Appeals Public Hearing:

- a. Staff reviews variance request and prepares comments for the Board of Zoning Appeals.
* **Stream buffer** requests require additional review; see County Stream Buffer Ordinance.
- b. The **Board of Zoning Appeals** considers application request during officially scheduled public hearing.
 - i. Either the applicant or a representative of the applicant **must be present** at the public hearing to present the petition and address any questions the Board of Zoning Appeals may have.
 - ii. The Board of Zoning Appeals will approve, approve with conditions, deny, or table the petition.
 - iii. The Zoning Ordinance provides approved variances one year for permitting (see Section 10.10).
- c. **Meeting date and time:** The Clayton County Board of Zoning Appeals meets on the second Thursday of every month at 7:00 p.m. (pre-meeting at 6:30 p.m. for staff review) at the Clayton County Administrative Building located at 112 Smith Street, Jonesboro, Georgia.

3. Public Notice: Notification for the scheduled public hearing follows the County Zoning Ordinance, Article XIII.

- a. **Notice Sign:** The petitioner allows the County staff to post on the subject property, at least fifteen (15) days prior to the public hearing, in a conspicuous place along every street frontage/public right-of-way.
- b. **Legal Notice:** The Department of Community Development staff prepares a legal notice that will appear in the newspaper no less than one (1) time at least fifteen (15) calendar days, but no less than forty-five (45) days, prior to the date of the public hearing.
- c. **Interested Parties:** Applicant provides proof of notice to interested party(ies) seven (7) business days prior to public hearing.



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Checklist:

- Completed variance application.
- Completed property owner authorization (notarized), if applicable.
- Completed campaign disclosure form, if applicable.
- Affidavit describing special powers of attorney, if applicable.
- Deed of the property identifying legal ownership.
- Ten (10) copies of **site plan** with survey boundary, drawn to scale, signed and dated by an engineer, landscape architect, or surveyor including the following information:
 - Subject property zoning and adjacent parcel zoning.
 - All dimensions of features relevant to the variance request, including existing or proposed structures.
- Letter of Intent** describing the details of the variance being requested and presenting information explaining or supporting the following criteria:
 1. Approval will not be injurious to the public health, safety, morals and general welfare of the community.
 2. The use and value of the adjacent property will not be affected.
 3. The strict application of the ordinance will create a hardship. This situation shall not be self-imposed, nor be based on a perceived reduction of, or restriction on, economic gain.

This letter should include any written commitments being made by the applicant/petitioner.
- A letter from the Clayton County Board of Health indicating that the variance will not negatively affect the operation of septic system, if applicable.
- Obtain addresses of properties requiring Notification to Interested Party mailing from staff.
- Provide proof of mailing to Zoning Administrator by _____(date).



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VARIANCE APPLICATION FORM

<u>FOR STAFF USE ONLY</u>	<u>DATE/TIME STAMP</u>
Project#: _____ Filing Fee: \$ _____ Received By: _____ Reviewed By: _____	
Date Addresses Provided to Applicant: _____	

This application is required for all variance submittals. Incomplete applications will not be accepted.

APPLICANT AND PROPERTY OWNER INFORMATION

1. Applicant Name:		
Address:		
City:	State:	Zip Code:
Phone#:	Fax#:	
Email Address:		

2. Property Owner Name:		
Address:		
City:	State:	Zip Code:
Phone#:	Fax#:	
Email Address:		

PROPERTY INFORMATION

PARCEL ID:			
3. Type of Project:	<input type="checkbox"/> New Construction	<input type="checkbox"/> Addition	<input type="checkbox"/> Alteration
4. Current Zoning:			
5. Land Lot(s):	District:	Section:	
6. Frontage (feet):	Depth (feet):	Area: (acres/sq. ft.)	
7. Street Address/Road Name:			
8. Subdivision:	Lot:	Block:	

9. Deed Book (include copy of plat): The subject property deed is recorded in Book _____, Page _____, in the Office of the Clerk of Superior Court, Clayton County, Georgia

10. Variance(s) Requested (Be Specific):

(All variances must be from the same Article. If additional variances are requested, please see below)

Article: _____ Request: _____

Article: _____ Request: _____

Article: _____ Request: _____

Article: _____ Request: _____

11. Hardship: The following topographic conditions or other exceptional circumstances unique to the property create a hardship justifying the variance:

12. Multiple Variances:

Are additional variances necessary to achieve relief? Yes No

If so, complete one application per section to be varied and list here:

Article: _____ Request: _____

Article: _____ Request: _____

Article: _____ Request: _____

Article: _____ Request: _____

I hereby certify that the information I have provided in this application is true and accurate.

Signature of Applicant

Date

AUTHORIZATION BY PROPERTY OWNER (if applicable)

I, _____ (Property Owner), SWEAR AND AFFIRM THAT I AM THE OWNER OF THE PROPERTY AT _____ (Property Address), PARCEL ID _____ AS SHOWN IN THE TAX MAPS AND/OR DEED RECORDS OF CLAYTON COUNTY, GEORGIA. I HEREBY AUTHORIZE THE PERSON(S) OR ENTITY(IES) NAMED BELOW TO ACT AS THE APPLICANT OR AGENT IN PURSUIT OF THE VARIANCE REQUESTED ON THIS PROPERTY.

Applicant Information:

Last Name:		First Name:	
Address:			
City:		State:	Zip Code:
Telephone Number: AREA CODE () NUMBER () - ()			

Notary Seal:

Print Name of Property Owner

Signature of Property Owner

Personally appeared before me this ____ day of _____, 20____.

Notary Signature

Date

Disclosure of Campaign Contributions
Clayton County

Pursuant to OCGA, Section 36-67A-3(a), the following disclosure is mandatory when an applicant or any representative has made campaign contributions aggregating \$250.00 or more to a local government within two (2) years immediately preceding the filing of this application.

It shall be the duty of the applicant and the attorney representing the applicant to file a disclosure with the governing authority of the respective local government. The following questions **must** be answered:

Have you, the applicant, made \$250.00 or more in campaign contributions to a local government official within two years immediately preceding the filing of this application? Yes No

If the answer is yes, you must file a disclosure report with the governing authority of Clayton County showing:

1. The name and official position of the local governing authority in Clayton County to whom the campaign contribution was made.

Name and official position of the applicant/representative (Please Print)

2. The dollar amount and description of each campaign contribution made during the two years immediately preceding the filing of this application and the date of each such contribution was made.

Description of Campaign Contribution (Please Print)	\$	Dollar Amount
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This disclosure must be filed within 10 days after the application is first filed and must be submitted to the Board of Commissioners of Clayton County at 112 Smith Street, Jonesboro, Georgia 30236.

Signature (choose one) Applicant Owner

Date

Notary Signature

Date and Seal

SPECIAL POWER OF ATTORNEY AFFIDAVIT

STATE OF GEORGIA
COUNTY OF CLAYTON

This ____ day of _____, 20____, I, the owner of

_____ make, constitute, and appoint _____
Property Address and/or Tax Map ID Name of Attorney or Representative

my true and lawful attorney-in-fact, and in my name, place, and stead giving unto said _____

full power and authority to do and perform all acts and make all representation necessary, without any limitation

whatsoever, to make application for said _____.
Type of Application

The right, powers, and authority of said attorney-in-fact herein granted shall commence and be in full force and effect on

_____, 20____, and shall remain in full force and effect thereafter until actual

notice, by certified mail, return receipt requested, is received by the Clayton County Department of Community

Development stating that the terms of this power have been revoked or modified.

Owner Signature

STATE OF GEORGIA:
COUNTY OF CLAYTON:

Subscribed and sworn to before me this ____ day of _____, 20____ in my county
and state aforesaid, by the aforementioned Principal.

NOTARY PUBLIC

My Commission Expires: _____