



# CITY OF ST. MARYS, GEORGIA **APPLICATION FOR REZONING**

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Planning & Building Department  
418 Osborne Street - (912) 510-4032

**APPLICANT:** *After completely reading this form, the applicant should answer each item as completely as possible. Please print or type. The Planning Director will assist you if necessary.*

**This is a request for an Amendment to the Official Zoning Map of the City of St. Marys. Please read Section VI of Zoning Ordinance 110, which applies to your proposal. Section VI will answer most of the questions you may have.**

1. Applicant (Your Name): \_\_\_\_\_ Daytime Phone: \_\_\_\_\_ Email: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_ Zip: \_\_\_\_\_
2. Location of Property to be Rezoned: \_\_\_\_\_  
Street: \_\_\_\_\_ Tax Map and Parcel Number: \_\_\_\_\_
3. Is this rezoning due to annexation? \_\_\_\_ YES \_\_\_\_ NO
4. Total Parcel area to be rezoned (size of parcel in square feet): \_\_\_\_\_ Square Feet
5. Present Zoning: \_\_\_\_\_ Abutting zones (list all zones that touch the parcel): \_\_\_\_\_
6. Proposed Zoning: \_\_\_\_\_
7. Are any Special Use(s) or Variance(s) or Covenant(s) or prior Rezoning(s) present on the parcel? \_\_\_\_ YES \_\_\_\_ NO  
If 'YES', list type and date: \_\_\_\_\_
8. The following data shall be attached as applicable:  
\_\_\_\_ Detailed site development plan, including survey data, wetlands, marsh, and other existing condition data.  
\_\_\_\_ Written report for PD rezoning, including all data required by Ordinance.
9. Proposed use (reasons for the rezoning request): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
10. Do you have legal possession of the parcel (s) proposed for this rezoning? \_\_\_\_ YES \_\_\_\_ NO  
(If 'NO' then this application cannot be processed until an application is received for all parcels intended to be rezoned.)
11. Owner's Name (If different from Applicant\*): \_\_\_\_\_  
Address: \_\_\_\_\_ Zip: \_\_\_\_\_ Daytime Phone: \_\_\_\_\_  
(\* If applicant is different from Owner, a legal authorization to represent the Owner must be attached to this application.)

I understand that the City of St. Marys will not process this application until I have submitted all required materials on or before the date of the approved schedule, which shall be not less than 32 days prior to the regularly scheduled and advertised monthly Planning Commission Public Hearing. Planning Commission Public Hearings are held on the fourth Tuesday of each month at 5:30 PM in Council Chambers. The recommendation of the Planning Commission is forwarded to City Council for their review at the next regularly scheduled meeting following the Planning Commission meeting.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_  
(Printed Name: \_\_\_\_\_)