



# Greene County Building and Zoning Department

**Chuck Wooley**  
*Building Official*

1034 Silver Drive, Suite 103 Telephone (706) 453-3333  
Greensboro, Georgia 30642 Fax (706)453-2579  
[www.greencountyga.gov](http://www.greencountyga.gov)

## Application to Amend the Land Use Regulation (Rezoning)

Name of Applicant: \_\_\_\_\_ Telephone No. \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
Name of Property Owner: \_\_\_\_\_ Telephone No. \_\_\_\_\_  
Property Address: \_\_\_\_\_  
Tax Map(s) & Parcel(s) Number \_\_\_\_\_ Acres: \_\_\_\_\_  
Zoning Classification: *Present* \_\_\_\_\_ *Requested* \_\_\_\_\_  
Use of Property: *Present* \_\_\_\_\_ *Requested* \_\_\_\_\_

\_\_\_\_\_ If the requested change is to extend an existing adjacent zoning district to include this property, explain below why the proposed change should be made.

\_\_\_\_\_ If the requested change is **not** to extend an existing zoning district, explain why this property should be placed in a different zoning district than all adjoining properties. (How does it differ from adjoining properties, and why should it be different restrictions than those applying to adjoining properties?)

Attach the following documents:

1. Written legal description of the property (e.g., copy of deed)
2. Eight (8) copies of plat prepared by a licensed surveyor showing property lines with lengths and bearings, adjoining streets, locations of existing buildings, north arrow and scale.
3. If property owner is not the same as the applicant, Authorization by Property owner form
4. Filing fee of \$550.00 payable to the Greene County Board of Commissioners

I hereby authorize the staff of the Greene County Board of Commissioners to inspect the premises of the above describe property. I hereby depose and state that all statements herein and attached statements submitted are true and correct to the best of my knowledge and belief.

\_\_\_\_\_  
Signature of Owner

\_\_\_\_\_  
Signature of Owner

Sworn to and subscribed before me \_\_\_\_\_ this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_

Notary Public, \_\_\_\_\_ County, GA.

\_\_\_\_\_  
Notary Signature

*MISSION STATEMENT: The mission for the Department of Building and Zoning is to provide services of the highest quality in the area of water pollution control, fire protection, building inspections and code enforcement in order to contribute to the physical, social and economic growth and providing safety within the build environment of Greene County.*



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## Disclosure of Campaign Contributions and Gifts

Reference: Application filed on \_\_\_\_\_ to rezone real property described as follows:

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All individuals and business entities having a property interest in above said property are as follows:

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Within the two years preceding the above filing date, the applicant has made campaign contributions aggregating \$250.00 or more or made gifts having the aggregate value of \$250.00 or more to each member of the Planning Commission or the Greene County Board of Commissioners listed below.

List below (1) the name of the Commission or Commission Member, (2) dollar amount and date of each such campaign contribution, and (3) an enumeration and description of each such gift having a value of \$ 250.00 or more.

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I hereby depose and say that all statements herein are true, correct and complete to the best of my knowledge and belief.

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Signature of Owner

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Signature of Owner

Sworn to and subscribed before me \_\_\_\_\_ this \_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_

Notary Public, \_\_\_\_\_ County.

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Notary Signature

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## Authorization of Property Owner (s)

### Application for Rezoning

I swear (I am) (we are) the owner(s) of the property which is the subject matter of the attached application, as is shown in the records of Greene County, Georgia.

I authorize the person named below to act as applicant for the rezoning of this property.

Name of the Applicant(s) \*as recorded on deed : \_\_\_\_\_

Address/Addresses: \_\_\_\_\_

Telephone Number(s): \_\_\_\_\_

Email Address/Addresses: \_\_\_\_\_

\_\_\_\_\_

Signature of Owner

\_\_\_\_\_

Signature of Owner

Sworn to and subscribed before me \_\_\_\_\_ this \_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_

Notary Public, \_\_\_\_\_ County, GA.

\_\_\_\_\_

Notary Signature

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