



THE CITY OF HAMPTON
 17 E. Main Street South
 P.O. Box 400
 Hampton, GA 30228
 (770) 946-4306

**MODIFICATION OF
 ZONING CONDITION(S)**
 (Pursuant to Appendix A: Zoning,
 Article 12. Section 12-7)

Name of Applicant: _____ Tel.: _____

Mailing Address: _____ Email: _____

Name of Property Owner: _____ Tel: _____

(Attach additional page for more than one owner. Applicant named above affirms that they are the owner or agent of the owner of the property described below and requests modification of zoning condition described).

Address of Property: _____ Tax Parcel No: _____

Size of Tract: _____ acre(s), Land Lot Number(s): _____, District(s): _____

Zoning Classification: Current: _____ Zoning Case No. _____

Modification Requested

Current condition: _____

Requested change: _____

Purpose: _____

ATTACH THE FOLLOWING DOCUMENTS:

1. Site plan depicting existing zoning condition and proposed modification.
2. Plat showing property lines, adjoining streets, existing zoning, floodplain when present, adjacent property owners and zoning info, north arrow and scale. Submit seven copies of the plat; including (1) digital pdf copy.
3. List adjacent property owners on mailing labels.
4. Disclosure of Campaign Contributions and Gifts Form.
5. If Property Owner and Applicant are different, Authorization by Property Owner Form or Authorization of Attorney Form.
6. Letter of Intent. Must clearly state the purpose and justification of proposed modification for City Council consideration.
7. Filing fee payable to the City of Hampton.

I hereby authorize the staff of City of Hampton to inspect the premises of the above described property. I hereby depose and say that all statements herein and attached statements submitted are true and correct to the best of my knowledge and belief.

Sworn to subscribe before me
 This _____ day of _____, 20_____.

 Signature of Applicant

 Notary Public

DISCLOSURE OF CAMPAIGN CONTRIBUTIONS

(Required by Title 36, Chapter 67A, Official Code of Georgia Annotated)

Reference: Application filed on _____, 20_____, to modify zoning condition(s), City of Hampton Ordinance No. _____ Item No.: _____, for real property described as follows:

Within two years preceding the above filing date, the Applicant has made campaign contributions aggregating \$250.00 or more to each member of the City Council of the City of Hampton who will consider the Application and is listed below. List (1) the name and official position of the local government official and (2) the dollar amount, description, and date of each such campaign contribution.

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

Signature of Applicant

Sworn to and subscribed before me

This _____ day of _____, 20____.

Notary Public



DISCLOSURE OF FINANCIAL INTERESTS

(Required by Title 36, Chapter 67A, Official Code of Georgia Annotated)

Reference: Application filed on _____, 20_____, to modify zoning condition(s), City of Hampton Ordinance No. _____ Item No.: _____, for real property described as follows:

_____ The undersigned official of the City of Hampton has a property interest (Note 1) in said property as follows:

_____ The undersigned official of the City of Hampton has a financial interest (Note 2) in a business entity (Note 3) which has a property interest in said property, which financial interest is as follows:

_____ The undersigned official of the City of Hampton has a member of the family (Note 4) having a property interest in said property of a financial interest in a business entity in said property, which family member and property interest or financial interest are as follows:

Note 1: Property interests – Direct ownership of real property, including and percentage of ownership less than total ownership.

Note 2: Financial interest – All direct ownership interests of the total assets or capital stock of a business entity where such ownership interest is 10 percent (10%) or more.

Note 3: Business entity – Corporation, partnership, limited partnership, firm, enterprise, franchise, association, or trust.

Note 4: Member of family – Spouse, mother, father, brother, sister, son or daughter.

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

Signature of Applicant

Sworn to and subscribed before me
This _____ day of _____, 20____.

Notary Public



AUTHORIZATION OF PROPERTY OWNER

Application for Modification of Zoning Condition(s)

I swear that I am the owner of the property, which is the subject matter of the attached application, as is shown in the records of Henry County, Georgia.

I authorize the person named below to act as Applicant in the pursuit of rezoning, variance, and/or modify zoning condition of this property.

Name of Applicant _____

Address _____

Telephone No. _____

Signature of Owner

Personally, appeared before me

Who swears the information contained in this authorization is true and correct to the best of his or her knowledge and belief.

Notary Public

Date



AUTHORIZATION OF ATTORNEY

Application of Modification of Zoning Condition(s)

I swear that as an attorney at law, I have been authorized by the owner to file the attached application.

Signature of Attorney

Name

Address

City

State

Zip Code

Telephone Number

