

Planning and Inspections Department

330 Town Center Ave., Suwanee GA 30024 Voice: 770-945-8996 · Fax: 770-945-2792 Suwanee Web site: www.suwanee.com

WAIVER INFORMATION FORM

The following items are necessary in order to process Waiver Applications:

1. APPLICATION FORM

Complete all sections of the application form. The application <u>MUST be signed</u> by both the applicant and the owner. Attach a copy of any review comments or correspondence from the City to your application.

2. APPLICATIONS FEES

Please make checks payable to **CITY OF SUWANEE**. The application fee is non-refundable.

Planning and Zoning Commission -----\$300.00

Appeal to City Council -----\$300.00 (additional)

3. LEGAL DESCRIPTION

A legal description is requested on an 8 ½" x 11" sheet.

4. SITE PLAN AND/OR BOUNDARY SURVEY

Eight (8) copies of the boundary survey and site plan are required. If the site plan is drawn on a closed boundary survey, you need only submit six copies of the site plan. One copy of each must be a 8 ½" x 11" reduced copy. On the site plan please highlight the reason for the waiver application.

5. ADDITIONAL PLANS

Submit plans as necessary to support your request. EXAMPLE: If it should be a road design request, complete details of the design, showing width, composition, etc. will be required. Provide an 8 ½" x 11" reduction in addition to the full size plan.

6. DOCUMENTATION

Any and all information related to the application which you believe may be helpful to the Board of Appeals to render a decision should be submitted along with the application.

7. No Application will be accepted for processing unless the application is <u>complete and all necessary plans are included with the application</u>. If you have any questions, please call the City of Suwanee (770-945-6583) and ask to speak to the Planning Director or Principal Planner.

APPLICATION FOR A WAIVER FROM THE DEVELOPMENT REGULATIONS OF THE CITY OF SUWANEE PLANNING AND ZONING COMMISSION

Please complete this application and submit with all necessary attachments as stated on the Waiver Information Form (please type or print)

<u>APPLICANT INFORMATION</u>	OWNER INFORMATION
Name:	Name
Address:	Address
City:	City:
State:	State
Phone:	Phone:
CONTACT PERSON:	PHONE:
ADDRESS OF PROPERTY	
LAND DISTRICT LAND LOT	PARCELLOT
TYPE OF PROJECT	
SUBDIVISION OR PROJECT NAME (IF APPLIC	ABLE)
ZONING	
WAIVER REQUESTED (Article, section, and parag	graph)
NEED FOR WAIVER	

***The property owner, applicant and /or a representative thereof shall be present at all meetings of the Zoning Board of Appeals, Planning Commission and/or Mayor and Council at which official action is requested on any variance or application for amendment. The failure of the property owner, applicant and/or a representative to attend such meetings shall result in the denial of said waiver.

^{*}A WAIVER FROM A CONDITION OF ZONING CANNOT BE ACCEPTED. SECTION 2007, APPLICANT AND/OR A REPRESENTATIVE.

APPLICANT CERTIFICATION

The undersigned below is authorized to make this application and is aware that an application or reapplication for the same type of waiver affecting the same land or any portion thereof shall not be acted upon within twelve (12) months from the date of last action by the Planning Commission, unless waived by the Planning Commission. An application or reapplication shall not be acted upon in less than (6) months from the date of the last action by the Planning Commission.

	Signature of Applicant	Date	
	Typed or Printed Name and Titl	e	
	Signature of Notary Public	Date	
Notary Seal			
<u>PRO</u>	PERTY OWNER CERTIFICATION	<u> 1</u>	
and is aware that an application or rany portion thereof shall not be acte Planning Commission unless waived	ed, is the record owner of the property eapplication for the same type of waived upon within twelve (12) months from the by the Planning Commission. An apply months from the date of the last action	er affecting the same land or in the date of last action by the plication or reapplication shall	
	Signature of Applicant	Date	
	Typed or Printed Name and Title		
	Signature of Notary Public	Date	
Notary Seal			
DEPARTMENT O	F PLANNING AND DEVELOPMEN	NT USE ONLY	
Case Number	-	istrative g Date	
ACTION TAKEN			
SIGNATURE			