



PUTNAM COUNTY PLANNING & DEVELOPMENT

117 Putnam Drive, Suite B ♦ Eatonton, GA 31024

Tel: 706-485-2776 ♦ 706-485-0552 fax ♦ www.putnamcountyga.us

CRITERIA FOR VARIANCE

As stated in the Putnam County Zoning Code of Ordinances, Section 75-64(3)(c), Required Findings for Variance Approval

(c) Variances.

(1) A variance from the development standards of this chapter may be granted if:

- a. The lot in question is exceptionally narrow, shallow or otherwise oddly shaped and was in existence when this chapter was adopted; or
- b. There are other exceptional or unusual features or aspects of the property that would result in undue hardship or practical difficulty to the owner were the chapter applied. The applicant cannot create or cause the unusual circumstances of which he complains.



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APPLICATION FOR ZONING ACTION: VARIANCE

Permit #20-_____

Application Information

(same as owner Yes No)

Name: _____

Address: _____

Phone: _____

Email: _____

Fax: _____

Arterial/State Road. Yes: _____ No: _____

Property Information

Address: _____

Map: _____ Parcel: _____

Presently Zoned: _____ Com. District: _____

Total Acreage: _____

In Conservation Use: Yes No

State Waters on Property: Yes No

Variance Request:

Maximum Lot Coverage allowed: _____ Proposed Lot Coverage: _____

Required Parking spaces: _____ Proposed Parking Spaces: _____

Maximum Building Height allowed: _____ Proposed Building Height: _____

TOTAL SQ. FT. (existing structure): _____ TOTAL FOOTPRINT (proposed structure) _____

LOT WIDTH AT BUILDING SETBACK (how wide the lot is where you are proposing to build):

LOT LENGTH (the total length of the lot) _____

SUPPORTING INFORMATION ATTACHED TO APPLICATION:

RECORDED PLAT: _____ LETTER OF AGENCY _____ LETTER OF INTENT _____

SITE APPROVAL/LAYOUT OF SEPTIC SYSTEM FROM HEALTH DEPARTMENT _____

PROPOSED LOCATION MUST BE STAKED OFF

*SIGNATURE OF APPLICANT: _____ DATE: _____

*APPLICANT HEREBY AFFIRMS THAT APPLICANT IS THE PROPERTY OWNER OR HAS THE LEGAL AUTHORITY TO SIGN THIS FORM ON OWNER'S BEHALF, AND APPLICANT AGREES TO INDEMNIFY AND HOLD PUTNAM COUNTY/CITY OF EATONTON HARMLESS IN THE EVENT IT IS DETERMINED APPLICANT DOES NOT HAVE SUCH LEGAL AUTHORITY.

DATE FILED _____	FEE: \$ 220.00	CK. NO. _____	CASH _____	C. CARD _____	INITIALS _____
RECEIPT # _____					
DATE OF NEWSPAPER AD: _____	DATE SIGN POSTED: _____				
PLANNING & ZONING HEARING: _____	RESULT: _____				
COMMISSIONERS'/CITY COUNCIL HEARING: _____	RESULT: _____				



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OWNER AUTHORIZATION

Submission of inaccurate information may be cause for denial of the requestor, if discrepancies are realized after the approval for the petition or issuance of the relevant local permits, cause for the revocation of the approval and any related permits by the Board of Commissioners. The following documents must be submitted with this application before the application deadline.

Incomplete applications will not be accepted or processed.

1. Payment of appropriate fee (please make checks payable to Putnam County Planning & Development)
2. Plat or site plan, drawn to scale, showing the locations of structures or uses for which the variance is sought, as well as the relationship to existing structures. Dimensions must be included.
3. A written description of your request in a letter format addressed to Putnam County Planning & Development. All required criteria (attached) must be addressed in the written description. Specific sections of the ordinance that would cause hardship must be identified, along with a description of the particular hardship.

The documents listed above are the minimum requirements. Staff may require additional documentation depending on the nature of the Variance Request. All submitted documents are public records and subject to Opens Records Law.

I have reviewed the application procedures and all applicable criteria and regulations in the Putnam County Zoning Ordinance for the above-requested Variance Request. I hereby claim that this application fulfills said procedures and meets the criteria for approval.

Applicant Signature: _____ Date: _____

I swear that I am the owner of the property listed above. I authorize _____ (applicant's name) to apply for a zoning action (zoning map amendment, conditional use, variance) at the above listed address, as identified on the attached application.

Owner signature

Notary Public
Sworn and subscribed before me this
_____ day of _____ 20____.



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CAMPAIGN CONTRIBUTION DISCLOSURE

Has applicant made \$250 or more campaign contributions to a local government official within two years immediately preceding the filing of this application? Yes No If yes, please complete contribution affidavit.

If the business of the applicant or owner, or the applicant or owner individually, have made contributions or gifts having a total value of over \$250 or more to any elected official in Putnam County within two (2) years preceding the date of this application, the following must be completed:

Name of Recipient	Date	Contribution Amount	Description of Gift	Value of Gift

Name of Business: _____

Business Ownership Interest: _____ Property Ownership Interest: _____

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

Owner or Applicant Signature

Notary Public
Sworn and subscribed before me this
_____ day of _____ 20____.