



# Chatham County Zoning Board of Appeals Application

1117 Eisenhower Dr ~ PO Box 8161  
Savannah, Georgia 31412-8161  
Phone: (912) 201-4300 / Fax: (912) 201-4301  
[www.chathamcounty.org](http://www.chathamcounty.org)



All information must be completed in full before this application will be processed and scheduled for a Zoning Board of Appeals (ZBA) hearing. Additional instructions, important dates and information regarding the appeals process are attached. Applicants are encouraged to meet with MPC staff to discuss the application prior to the day of submission.

## 1) Subject Property

Street Address: \_\_\_\_\_

Subdivision Name: \_\_\_\_\_ Lot Number(s): \_\_\_\_\_

Property Identification Number(s): \_\_\_\_\_

Zoning District(s): \_\_\_\_\_

## 2) Reason for Application

Check all that apply:

\_\_\_\_\_ To appeal an order, requirement, decision or determination of the Zoning Administrator when an error is alleged (Zoning Ordinance Section 10-6.1). You must attach a copy of the written determination of the Zoning Administrator that you are appealing. An appeal must be filed no later than 30 days after the date that the determination was rendered by the Zoning Administrator. The appeal must be filed with MPC and the Zoning Administrator.

\_\_\_\_\_ To establish a special use (Section 10-6.2) Use Number \_\_\_\_\_

\_\_\_\_\_ A request for an extension or expansion of a nonconforming use (Section 10-6.4)

\_\_\_\_\_ To request a variance (Section 10-6.3). Identify the type and amount of variance(s) below and refer to Page 4 for plot plan criteria. Example: 5 foot reduction of the 25 foot rear yard setback (use additional paper, if necessary):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**3) Property Owner(s)**

Name(s): \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_  
E-mail address: \_\_\_\_\_

**4) Agent (If not property owner)**

If the property owner(s) will have an agent serve on his or her behalf, the owner(s) must complete the attached Letter of Authorization.

Name(s): \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_  
E-mail address: \_\_\_\_\_

**5) Fee**

The application fee is based on the type of use for which relief is requested. Make check payable to Chatham County.

- \_\_\_\_\_ Commercial: \$1300.00 (\$1,180 MPC fee + \$120 BSRS fee)
- \_\_\_\_\_ Single Family Residential: \$620.00 (\$500 MPC fee + \$120 BSRS fee)

**6) Certification**

By my signature below, I certify that the information contained in this application is true and correct to the best of my knowledge at the time of the application. I acknowledge that I understand and have complied with all of the submittal requirements and procedures, and that this application is a complete application submittal. I further understand that an incomplete application submittal may cause my application to be deferred to the next posted deadline date.

\_\_\_\_\_  
Applicant Name (Signature)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Applicant Name (Print)

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**OFFICE USE ONLY**

Project Planner:  
Pre-application meeting date, if any:  
Date notice posted on property:  
Dates notice published in newspaper:

**Letter of Authorization**

**As fee simple owner of the subject property that is identified as Property Identification Numbers \_\_\_\_\_, I (we) authorize \_\_\_\_\_ (Agent Name) of \_\_\_\_\_ (Firm or Agency, if applicable) to serve as agent on my (our) behalf for the purpose of making and executing this application for the proposed request. I (we) understand that any representations(s) made on my (our) behalf, by my (our) authorized representative, shall be legally binding upon the subject property.**

\_\_\_\_\_  
**Owner Name (Signature)**

\_\_\_\_\_  
**Owner Name (Print)**

\_\_\_\_\_  
**Date**

### **Instructions**

1. Applicants are encouraged to meet with MPC staff to discuss their application prior to the day of submission. Call 651-1440 for an appointment.
2. The application form must be completed (including appropriate fee) and include all required supplemental materials before it will be processed and scheduled for a hearing. A plot plan must be provided when a dimensional variance or use permit is requested. Three copies of the application, plot plan and any other supporting documents must be provided. Plot plan criteria are listed below.
3. A printed or typed list including the names, addresses and zip codes of surrounding property owners (within 200 feet of the subject property) must be submitted with the application.
4. Applications must be submitted to Building Safety and Regulatory Services, 1117 Eisenhower Drive, Savannah, GA 31406.

### **Zoning Board of Appeals Process (After the Application is Submitted)**

1. Once an application submittal is determined to be complete, it will be scheduled for the next posted ZBA hearing date. The applicant will receive a notice of the date and time of the ZBA meeting. As a policy, MPC will mail a notice of the hearing to all owners of property within a 200 foot radius of the subject property. All ZBA meetings are held on the fourth Tuesday of each month at 9:00 a.m. unless otherwise posted.
2. The applicant must post a sign announcing the ZBA hearing at least 15 days prior to the scheduled hearing date. Once an application is deemed complete by MPC staff, the applicant will be contacted to pick up a sign at the Building Safety and Regulatory Services office. Instructions regarding posting will be attached to the sign.
3. A copy of the staff report will be provided to the owner or agent before the ZBA meeting. The ZBA is responsible for making the decision.
4. An overhead projector is available for use. The overhead projector can display all paper items (e.g., photographs, maps, site plans). PowerPoint presentations must be provided to staff no later than the day prior to the meeting. A copy of any item used to support your petition must be submitted for the record.
5. A request to continue a petition that occurs after legal notice of the petition is published can be continued only by the ZBA; however, the ZBA may or may not grant the request.
6. The decision of the ZBA will be prepared and provided to the owner or agent after the meeting.

### **Plot Plan Information**

If you are applying for a dimensional variance, a plot plan must be submitted with this application. An example of a plot plan is available upon request. The plot plan must include the following information:

- North arrow and scale
- Street name(s)
- Dimensions of lot
- Existing and proposed structures on lot (identify each structure - e.g., house, shed, pool)
- Dimensions between all structures and property lines and/or fences
- Dimensions between all structures on lot
- Location and dimensions of proposed addition
- Type of fence (for example, chain link, wood, masonry, etc.)
- Proposed landscaping
- Project status (proposed or existing)

### **Other Contacts**

Zoning Administrator: Building Safety and Regulatory Services, 1117 Eisenhower Dr (Phone: 912-201-4300)  
(Mailing Address: P.O. Box 8161, Savannah, GA 31412-8161)

County Engineering: 124 Bull Street, Room 430 (Phone: 912-652-7800)  
(Mailing Address: P. O. Box 8161, Savannah, GA 31412-8161)

Metropolitan Planning Commission: 110 E. State Street, Savannah, GA 31401 (Phone: 912-651-1440)

## 2018 Zoning Board of Appeals Meeting Dates & Application Submission Dates

<b>Meeting Date</b> <i>(4<sup>th</sup> Tuesday unless noted)</i> <b>9:00 a.m.</b>	<b>Application Cut-Off Date</b> <i>(4<sup>th</sup> Friday)</i>
JAN 23	DEC 19
FEB 27	JAN 26
MAR 27	MAR 2
APR 24	MAR 30
MAY 22	APR 27
JUN 26	MAY 25
JUL 24	JUN 29
AUG 28	JUL 27
SEP 25	AUG 31
OCT 23	SEP 28
NOV 27	OCT 26
DEC 18 <i>(3<sup>rd</sup> Tuesday)</i>	NOV 30 <i>(5<sup>th</sup> Tuesday)</i>
JAN (TBD)	(TBD)