

CDECLAL EXCEDEION(C)

Signature:

| Office Use Only |
|-----------------------------------|
| COA Number: |
| Application Accepted as Complete: |

HISTORIC DISTRICT BOARD OF REVIEW DOWNTOWN SAVANNAH HISTORIC DISTRICT

Board Review Checklists for Certificate of Appropriateness Application Special Exception(s) Requests

Per House Bill 493, detailed checklists of items required to be submitted for each type of project are supplemental to this application. Each item **must be checked off and a page number where the item is located must be noted** and included with the application. The applicant must sign the affidavit, at the end of the application and each required checklist, certifying that all required items are provided. If there are questions regarding items required for your specific project, contact staff for clarification prior to submitting the application.

Applications that do not provide documentation or required materials will be noted as incomplete and may result in delays in the Board or Staff's review of the application and/or denial of the request. Revisions made to the applications after the submittal deadline and prior to the Board hearing may be continued to the following month's hearing. The Board reserves the right to require additional information if it believes that the submission of such information is necessary to understand the nature of the intended activity.

| SPECIAL EXCEPTION(S). |
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| Special exceptions, as identified in Sec. 3.12.2.a.ixxi., for the Savannah Downtown Historic Overlay District shall be considered by the Savannah Downtown Historic Board of Review (City of Savannah Zoning Ordinance, Sec. 3.12.6). |
| When reviewing a special exception request, a finding shall be made by the Savannah Downtown Historic Board of Review for each of the criteria listed below (City of Savannah Zoning Ordinance, Sec. 3.12.7). |
| ☐ REQUIRED Pre-Application Conference (Sec. 3.19.4.a. of the zoning ordinance): |
| Date attended and with which staff member: |
| ☐ Provide electronic payment receipt and indicate amount: \$ |
| ☐ Provide one (1) electronic copy of the entire submittal packet. (Email to historic@thempc.org with 15MB max) |
| □ Page No: Written description of the special exception request (include the entire text of the standard and the section within the ordinance). |
| ☐ Page No: Written description of how each review criterion is met for a special exception request: |
| ☐ Whether the use for which the special exception is being considered would be located, operated and maintained in a manner in conformance with the goals, policies, and objectives of the Comprehensive Plan and the provisions of this Ordinance. |
| ☐ Whether the special exception would not be detrimental to the public interest, health, safety, welfare, functions, and appearance of the adjacent uses or general vicinity. |
| Affidavit Certifying Completeness of Application: |
| I hereby acknowledge that I understand the requirements listed above for what constitutes a complete application. I have checked off each box and included a page number where the item is located. I confirm that the requirements for a complete application have been met. |