



PLANNING AND DEVELOPMENT SERVICES DEPARTMENT

APPLICATION FOR SIGN VARIANCE

Instructions for Applicant:

Please complete this form and submit with any requested documents in order to complete the Variance Application. We recommend that all development professionals conducting business in the City of Griffin review the current Unified Development Code (UDC), prior to submission of this application, depending on the type of development. The UDC can be found at www.cityofgriffin.com.

The application, with all appropriate attachments (listed below), should be delivered to the Planning & Development Services Department located at 100 S. Hill Street, 3rd Floor, Griffin, GA 30223. You may reach our office by phone at (770)233-4130 between the hours of 7:30 AM and 4:30 PM Monday thru Friday, and by fax at (770)233-2915. Please contact our office if you have any questions about this application or the Variance Process.

Variance Submission Requirements:

1. Complete Variance Application
2. Complete Variance Questionnaire
3. Property Owner or Owner's Representative Authorized Form
4. Conflict of Interest Disclosure
5. Site Plan or drawing of the respective development

CITY ACTIONS:

Planning & Development Services Staff will determine if the application is complete, assign a case number to the application, and indicate the date of receipt. The applicant will be notified in writing of the date, time and place of the required Public Hearing before the City of Griffin Board of Commissioners. It is important that a representative of the requested Variance attend the Public Hearing.

The applicant, engineer, or other representative is responsible for obtaining copies of all applicable City of Griffin ordinances and development guidelines, codes, and regulations, and to resolve all comments received and related issues.



PLANNING AND DEVELOPMENT SERVICES DEPARTMENT

APPLICATION FOR SIGN VARIANCE

Date Received: _____ Application Number: _____

Applicant: _____ Telephone Number: _____

Email Address: _____

Address: _____

Project Name/Description: _____

Address/Location: _____

Tax Map _____

Block _____

Lot Number _____

Zoning _____

Parcel(s) Size: _____ (acres or square feet)

Applicant is: Property Owner _____

Engineer: _____ Architect: _____

Realtor: _____

Other: _____

Application fee amount: _____

Paid by: _____ Check (check # _____) _____ Cash

_____ Cashier's Check _____ Other

I attest that this Variance Application and its attachments meet all applicable requirements of the City of Griffin ordinances and development guidelines, codes, and regulations to the best of my knowledge.

Signature of Applicant (or authorized representative)

Date: _____



PLANNING AND DEVELOPMENT SERVICES DEPARTMENT
SIGN VARIANCE QUESTIONNAIRE

Date Submitted: _____ Application Number: _____

Applicant Name: _____

Address of Property: _____

Tax Map, Block and Lot Number: _____

Applicable Zoning Ordinance Section: _____

A. The following information must be submitted with the Variance Application:

1. One (1) copy of a site plan, boundary survey, and Tax Map of the property

B. Please provide written answers to the following questions to justify a Request for Variance:

1. Would the proximity of existing signs on adjoining lots cause the subject property to be ineligible, due to the spacing requirements, for a sign of the type sought?
2. Would visibility of a conforming sign from the proposed street and within 50 feet of the proposed sign would be substantially impaired by existing trees, plants, natural features, signs, buildings or structures on a different lot? And
 - a. Placement of the sign elsewhere on the lot would not remedy the visual obstruction?
 - b. Such visibility obstruction was not created by the owner of the subject property?
 - c. The variance proposed would not create a safety hazard to vehicular traffic or pedestrians?



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OWNER'S AUTHORIZATION

This is to certify that:

(Name of Applicant, Property Owner, or other Representative)

The person named above is the Owner or Representative of the Owner holding interest in the property that is the subject of the attached application.

By execution of this form, authorization is given to the person named as "Applicant" below, acting on behalf of the owner, to file for and pursue a request for approval of the following.

- Rezoning
- Special Use Request
- Variance Request
- Minor Site Plan
- Preliminary Site Plan
- Final Site Plan/ Subdivision Plat

Applicant: _____ Telephone Number: _____
Address: _____

Signature of Owner

Date: _____

Signature of Representative

Date: _____

Notary Signature and Seal
Commission expiration date: _____



PLANNING AND DEVELOPMENT SERVICES DEPARTMENT
CONFLICT OF INTEREST DISCLOSURE

Have you, within the two (2) years immediately preceding the filing of this application, made campaign contributions aggregating \$250.00 or more to a member of the Board of Commissioners, a member of the Planning & Zoning Board, or any other government official who will consider this application?

____ Yes ____ No

If yes, please complete the following section:

Name and Official Position of Government Official:

Please list the Date and Amount of Contribution(s) (List all which aggregate \$250.00 or more)

Signature of Applicant

Date: _____

Printed Name

Signature of Applicant's Attorney or Representative

Date: _____

Printed Name