

Donation Box Permit Application Checklist

- Completed Donation Box Permit Application
- Application Fee - \$100.00
- Detailed color graphic/ picture of donation box:
 - o Show box color
 - o Indicate all measurement of donation box
 - Height (grade to highest point)
 - Width
 - Depth
 - o Indicate all signage to be displayed
 - Include sign graphic(s) with measurements
 - Show location of sign(s) on donation box
- Site plan of parcel (to scale):
 - o Note scale of site plan.
 - o Include parcel address, size/ acreage, and zoning district.
 - o Indicate required zoning setbacks and established buffers.
 - o Show all public streets adjacent to property with name and Right of Way included.
 - o Show all parking spaces, drive isles and loading area(s).
 - Indicate traffic circulation (one way/ two way arrows)
 - o Indicate landscape and planter areas.
 - o Show building footprint of permanent structure(s) on parcel.
 - o Label the proposed location of box to be installed and all existing donation boxes on parcel.
 - o Label type of impervious surface for box location.



DONATION BOX PERMIT APPLICATION

Location	*Address of Donation Box:			*Tax Map/ Parcel Number:			
	*Shopping Center:						
	*Zoning District:		*Principal Use	*Parcel Size:	*Size of Donation Box: Total Cubic ft: _____		
	<input type="checkbox"/> CBD <input type="checkbox"/> HDR-A <input type="checkbox"/> LDR-C <input type="checkbox"/> NBD <input type="checkbox"/> HDR-B <input type="checkbox"/> MDR <input type="checkbox"/> PCD <input type="checkbox"/> LDR-A <input type="checkbox"/> PRD <input type="checkbox"/> PID <input type="checkbox"/> LDR-B	<input type="checkbox"/> Charity <input type="checkbox"/> Church <input type="checkbox"/> School <input type="checkbox"/> _____	Acres: # Existing Boxes:				
				*Width:	*Depth:	*Height:	

Donation Box	*Organization:		*Applicant:			
	*Address:		*City:	*State:	*Zip:	
	*Phone:					
	*Email:		*Signature of Applicant			
	*Website:					
			Print Name/ Title		Date	

Property Owner	*Property Owner/ Management:		*Contact:			
	*Address:		*City:	*State:	*Zip	
	*Phone:					
	*Email:		*Signature of Property Owner			
	*2 nd Contact:					
			Print Name/ Title		Date	

Business owner	*Business Name:		*Contact:			
	*Occ. Tax# (Business License)/ Exp. Date:					
	*Phone:		*Signature of Business Owner			
	*Email					
			Print Name/ Title		Date	

TERMS OF AGREEMENT

Signature on this application by the Donation Box Owner, Property Owner/ Management, and Business Owner verifies that they agree to conform with and abide by the rules, regulations and provisions of the City of Griffin Unified Development Code, Article 5 Section 503 I, pertaining to the installation and maintenance of collection bins now or hereafter in force.