

**RABUN COUNTY PLANNING & ZONING OFFICE**

19 Jo Dotson Circle, Suite 205  
Clayton, GA 30525  
Telephone: 706-782-1579  
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**RABUN COUNTY PLANNING COMMISSION APPLICATION FORM**

Application for:	Fee
<input type="checkbox"/> Amendment for zoning map	_____
<input type="checkbox"/> Permit for continuance of a non-conforming use	_____
<input type="checkbox"/> Planned Unit Development	_____
<input type="checkbox"/> Amendment of subdivision regulations	_____
<input type="checkbox"/> Subdivision plat	_____ per lot
<input type="checkbox"/> Preliminary plat	_____
<input type="checkbox"/> Final plat ( <b>Fee per lot</b> )	_____
<input type="checkbox"/> Variance	_____
<input type="checkbox"/> Specific purpose	_____

**All applications must have accompanying plat before advertisement will be published**

Name: \_\_\_\_\_ Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

Name of Development: \_\_\_\_\_ Acreage: \_\_\_\_\_

Location of Property: \_\_\_\_\_ Tax Parcel #: \_\_\_\_\_

Land Lot: \_\_\_\_\_ Land District: \_\_\_\_\_

Present Zoning: \_\_\_\_\_ Proposed Zoning: \_\_\_\_\_

Nature of Action Petitioned: \_\_\_\_\_

Supporting Statement: \_\_\_\_\_

Existing Use: \_\_\_\_\_ Proposed Use: \_\_\_\_\_

I am the sole owner of above described property, or if joint ownership, I have the authority to sign for all owners.

APPLICANT OR AN AUTHORIZED REPRESENTATIVE MUST BE PRESENT AT THE ZONING MEETING AND THE BOARD OF COMMISSIONERS' MEETING.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_