



Date: \_\_\_\_\_

Application # SU \_\_\_\_\_

REQUEST FOR SPECIAL USE APPROVAL

Form with sections: APPLICANT INFORMATION, PROPERTY OWNER INFORMATION\*, CONTACT PERSON, PROPERTY INFORMATION. Includes fields for Name, Address, City, State, Zip, Phone, and checkboxes for Property Owner, Contract Purchaser, Agent, Attorney.

You must attach: [ ] Application Fee [ ] Legal Description [ ] Plat of Property [ ] Campaign Contribution Disclosure [ ] Site Plan [ ] Names/Addresses of Abutting Property Owners [ ] Letter of Intent [ ] Impact Analysis

Pre-Application Conference Date: \_\_\_\_\_

Accepted by Planning & Development: \_\_\_\_\_ DATE: \_\_\_\_\_ FEE PAID: \$500.00

CHECK # \_\_\_\_\_ RECEIPT # \_\_\_\_\_ TAKEN BY: \_\_\_\_\_ DATE OF LEGAL NOTICE : \_\_\_\_\_ NEWSPAPER: THE WALTON TRIBUNE

PLANNING COMMISSION RECOMMENDATION: [ ] Approve [ ] Approve w/conditions [ ] Deny [ ] No Recommendation

Commission Chairman: \_\_\_\_\_ DATE: \_\_\_\_\_

CITY COUNCIL ACTION: [ ] Approved [ ] Approved w/conditions [ ] Denied [ ] Tabled to \_\_\_\_\_ [ ] Referred Back to Planning Commission [ ] Withdrawn

Mayor \_\_\_\_\_ City Clerk \_\_\_\_\_ Date \_\_\_\_\_

**Applicant's Certification**

The undersigned hereby certifies that they are authorized by the property owner(s) to make this application and that all information contained herein is complete and accurate, to the best of their knowledge.

\_\_\_\_\_  
Applicant's Signature Date

\_\_\_\_\_  
Print Name and Title

Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

(Seal) \_\_\_\_\_  
Signature of Notary Public

**Property Owner's Certification**  
(complete a separate form for each owner)

The undersigned hereby certifies that they are: (check all that apply)

- a) \_\_\_\_\_ the owner of record of property contained in this application, and/or
- b) \_\_\_\_\_ the Chief Executive of a corporation or other business entity with ownership interest in the property and is duly authorized to make this application, and

that all information contained in this application is complete and accurate to the best of their knowledge.

\_\_\_\_\_  
Owner's Signature Date

\_\_\_\_\_  
Print Name and Title

Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

(Seal) \_\_\_\_\_  
Signature of Notary Public



**APPLICANT'S RESPONSES TO EVALUATION CRITERIA**

In the space provided or in a separate attachment, provide responses to the following questions:

1. How does the proposed use impact the overall appearance of the City and aesthetic conditions of adjacent parcels?
  
  
  
  
  
  
  
  
  
  
2. How does the proposed use impact thoroughfare congestion and traffic safety?
  
  
  
  
  
  
  
  
  
  
3. How does the proposed use impact population density and the potential for overcrowding and urban sprawl?
  
  
  
  
  
  
  
  
  
  
4. How does the proposed use impact the provision of water, sewerage, transportation and other urban infrastructure services;
  
  
  
  
  
  
  
  
  
  
5. How does the proposed use provide protection of property against blight and depreciation?
  
  
  
  
  
  
  
  
  
  
6. How is the proposed use consistent with the adopted Comprehensive Plan?
  
  
  
  
  
  
  
  
  
  
7. In what way does the proposed use affect adjacent property owners if the request is approved?
  
  
  
  
  
  
  
  
  
  
8. What is the impact upon adjacent property owners if the request is not approved?
  
  
  
  
  
  
  
  
  
  
9. Describe any other factors affecting the health, safety, morals, aesthetics, convenience, order, prosperity, or the general welfare of the present and future inhabitants of the City of Loganville.