



Application for Zoning Text Amendment  
P.O. Box 386 Toccoa, Georgia 30577  
Phone: (706)886-9491/Fax: (706)886-2185

---

Please type or print legibly. Attach additional sheets, if necessary, to fully answer any of the following sections. Incomplete applications will not be accepted for processing by the Stephens County Planning Commission (SCPC) until deficiencies are corrected. Additional instructions and information are located on page 4.

## I. GENERAL INFORMATION

### Petitioner Information

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

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_ Zip: \_\_\_\_\_

Telephone No.: (\_\_\_\_) \_\_\_\_\_ Fax No.: (\_\_\_\_) \_\_\_\_\_

E-mail Address: \_\_\_\_\_

### Agent Information, if different from Petitioner or Owner

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

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_ Zip: \_\_\_\_\_

Telephone No.: (\_\_\_\_) \_\_\_\_\_ Fax No.: (\_\_\_\_) \_\_\_\_\_

E-mail Address: \_\_\_\_\_

## II. ACTION REQUESTED

### (A) Application History

Have any previous applications been made for a similar text amendment?

Yes \_\_\_\_ No \_\_\_\_ If yes, please provide the file number(s):

\_\_\_\_\_

**(B) Text Amendment**

1. Identify the specific section(s) of the Zoning Ordinance sought to be amended, including section number.

---

---

---

a) What is the existing text requested to be repealed.

---

---

---

---

---

---

---

---

---

---

b) What is the proposed text.

---

---

---

---

---

---

---

---

---

---

2. State the reason(s) for the text amendment.

---

---

---

**III. SUBMITTAL REQUIREMENTS**

**All applications must include the following:**

**A. Application.** A completed original application form and one copy.

**B. Submittal Fee.** No submittal fee required.

**Petitioner states that she/he has read, understands and has completed this application. Approval of an application for zoning text amendment by the Stephens County Board of Commissioners does not constitute a waiver from any applicable local, state or federal regulations.**

\_\_\_\_\_  
**Signature of  
Petitioner or Petitioner’s Agent**

\_\_\_\_\_  
**Printed Name**

\_\_\_\_\_  
**Date**

**INSTRUCTIONS / INFORMATION FOR THE PETITIONER**  
**(Retain This Page for Your Records)**

1. The petitioner and/or agent is encouraged to speak with SCPC staff prior to submitting an application for a zoning text amendment.
2. Submit the completed original application and one copy to the County Clerk. Faxed applications will not be accepted.
3. The petitioner or agent may include exhibits (e.g., letters or photos) to support the request. If a signed petition is to be submitted, please provide the original at the Planning Commission meeting and make a copy to be retained for your records.
4. Once the application is deemed complete, SCPC staff will schedule the petition for review by the Planning Commission and prepare a recommendation. You will receive a letter acknowledging receipt of the petition and notifying you of the Planning Commission meeting date and time. The staff recommendation will be sent to you. A schedule of SCPC and Stephens County Board of Commissioner meetings is available online at [www.stephenscountyga.com](http://www.stephenscountyga.com).
5. The Planning Commission will make a recommendation to the Stephens County Board of Commissioners regarding the petition. The Planning Commission may approve, deny or recommend an alternative to the request. The petitioner will be notified of the date and time of the County Commission hearing.
6. The Stephens County Board of Commissioners must have at least two meetings for the petition for approval; a zoning hearing and then the first and second readings of the amendment. If a motion is made at the hearing to approve the request, the following meeting(s) will be to hear the first and second readings of the amendment. Notification of the decision of the Stephens County Board of Commissioners will be sent to the petitioner or agent.
7. **The petitioner or petitioner’s agent should be in attendance at all Planning Commission and County Commission meetings.** If no one is present to represent the petition, it may be denied.

	<b>CONTACT INFORMATION</b>	
County Clerk	P. O. Box 386 Toccoa, GA 30577	706-886-9491
Planning Director	P.O. Box 386 Toccoa, GA 30577	706-886-9491
Stephens County Planning Commission	P. O. Box 386 Toccoa, GA 30577	706-886-9491