Application to REZONE Property

McIntosh County Building & Zoning
912-437-6603
100 Madison Street • P.O. Box 2694
Darien, GA 31305

The undersigned applies to the McIntosh County Planning & Zoning Commission and the McIntosh County Board of Commissioners to rezone property in McIntosh County, Ga., as follows:

1. _____
   Legal name and address of **Applicant**

   _____ _____
   Telephone number of Applicant **Email Address** of Applicant

2. _____
   Legal name and address of **Owner,** if other than Applicant

   _____ _____
   Telephone number of **Owner** **Email Address** of **Owner**

3. _____
   Legal name and address of **Agent,** if application is by Agent

   _____ _____
   Telephone number of Agent, if application is by Agent **Map & Parcel** Number of Property

4. _____
   Address/Physical Location and **Size of Property** to be Rezoned

5. _____ 6. _____
   Current Zoning Classification of property **Proposed Zoning Classification** of property

7. _____
   Proposed use, if property is rezoned

8. The following documents are attached in support of this application:
   _____ Copy of Deed conveying property to Applicant/Owner.
   _____ Letter of Agency, if applicant is other than the Owner.
   _____ Copy of survey plat map of property.
   _____ Disclosure report of campaign contributions O.C.G.A. §36-67A-3(a).
   _____ Rezoning classification requirements for _____. Refer to _____ Supplemental Form.
   _____ Appointment made at Building & Zoning Office for review and additional items required.
   _____ Returned to Building & Zoning Office for Final Review.
   _____ All required items turned in to Building & Zoning Office **30 days** prior to Zoning Board meeting.
   _____ Fee – $225.00 per tract/lot

_____ _____
Date Signature of Applicant

NOTE: If the applicant is a business entity, indicate the form of the business entity (sole proprietorship, partnership, corporation, partnership, etc.), and provide the name and address of the owners, principal officers or partners. Provide the position of the person signing the application, i.e., owner, president, partner, etc. Each of the officers, principal owners or partners must sign a Disclosure Report.

Prior to submitting this application, if the property in question does not already have water and sewer access, it is strongly recommended that the applicant contact Corey Lightsey at the McIntosh County Health Department, telephone 912-832-5473, to determine the suitability of the soil on this property to support a septic or other waste treatment equipment as well as the ability to drill a well or wells for potable water on the property. Any subdivision development within 200 feet of access to a County Water System must connect and obtain water through that system unless a letter of waiver is obtained from the County Administrator.
(Revised 8/22/2024)

*****See the McIntosh County Code of Ordinances in its entirety for further requirements of this application, including, but not limited to, "Appendix C – Zoning Ordinance" – "Article 7. Zoning Decisions" and "Article 8. Procedures for Zoning Decisions," by accessing the McIntosh County website: www.McIntoshCountyGa.com → Government tab → Codes & Ordinances → McIntosh County Municipal Codes. You must click "Proceed to site" to acknowledge leaving the County's website before you can access the document.***

DISCLOSURE REPORT

To be included with
Rezoning, Variance, or Special Use Applications
for McIntosh County, Ga.

I hereby certify that:
___ Within the two (2) years preceding the filing of the attached application for rezoning or a variance, I **HAVE NOT** made any campaign contributions or gifts to any local government official of McIntosh County, Georgia, as defined by the Official Code of Georgia Annotated, Section 36-67A-3.

OR

___ Within the two (2) years preceding the filing of the attached application for rezoning or a variance, I **HAVE** made campaign contributions or gifts to local government officials of McIntosh County, Georgia, as follows:

Name of Official:	**Date of Contribution/Gift:**	**Amount:**
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

_____
Signature of Applicant