



come to morrow
MORROW, GEORGIA

CONDITIONAL USE/VARIANCE APPLICATION

1500 Morrow Rd. Morrow, GA 30260 678.902.0870 (T) 770.960.3002 (F)

THIS PACKET INCLUDES THE NECESSARY DOCUMENTS NEEDED FOR CONDITIONAL USE/VARIANCE APPLICATIONS TO BE HEARD BY THE MORROW:

PLANNING & ZONING BOARD AND/OR
MAYOR AND CITY COUNCIL

PLEASE NOTE: ALL FEES ARE NON-REFUNDABLE. THERE ARE NO EXCEPTIONS.

PRE-APPLICATION CONFERENCE IS REQUIRED WITH COMMUNITY DEVELOPMENT STAFF EITHER VIA PHONE OR IN PERSON. THIS MEETING SHALL BE SCHEDULED WITH COMMUNITY DEVELOPMENT STAFF BY APPOINTMENT ONLY.

ALL APPLICATIONS MUST BE SUBMITTED NO LESS THAN 20 DAYS PRIOR TO THE ZONING BOARD/CITY COUNCIL MEETING.

Conditional Use/Variance Application Checklist

ALL DOCUMENTS ARE REQUIRED IN ORDER TO ACCEPT APPLICATION.

REQUIRED ITEMS	COPIES	PROCEDURE	STAFF INITIAL
Application Form	1	1. Signed and notarized by owner. Original signature required. 2. In lieu of owner's signature, applicant has signed and notarized a copy of a "Contract", "Power of Attorney" or "Lease"	
Letter of Ownership	1	Letter stating that the owner is aware of the variance request and owns the property in question	
Letter of Intent	1	Must clearly state the proposed use and development intent	
Survey Plat/Site Plan (11 x 17)	12	Must show minimum details: Buildings, setbacks, buffers, road frontage, correct scale, north arrow, present zoning classification, topographic information to show elevation and drainage, location and extent of required buffers, proposed lot layout	
Floor Plan		Floor plan of the space layout	
Fees		A non-refundable fee of \$650.00 is required at the time of submittal in the form of a check or money order.	



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Community Development Department

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Conditional Use/Variance Request Application

Applicant/Business Owner Information:

NAME:	ADDRESS OF BUSINESS:
PHONE #:	EMAIL:

I, _____ OF _____, AM REQUESTING THIS
CONDITIONAL USE/VARIANCE ON BEHALF OF _____ (Business Owner
 Name).

Property Owner/Landlord Information: [If located within a tenant space, landlord information is required here.]

NAME:	ADDRESS:
CONTACT PERSON:	EMAIL:
PHONE #:	ALTERNATE #:

The applicant named above affirms that they are the owner or agent of the owner for the property described below and requests the following variances:

Conditional Use/Variance being requested: _____

Section of the City of Morrow Ordinance that your request relief from due to hardship: _____

BY SIGNING BELOW, I CERTIFY THAT I HAVE EXAMINED AND UNDERSTAND ALL INFORMATION ON THIS APPLICATION AND THAT THE ABOVE STATEMENTS AND INFORMATION SUPPLIED BY ME ARE TRUE AND CORRECT. VARIANCE AND CONDITIONAL USE REQUESTS SHALL BE EVALUATED ACCORDING TO ALL PROVISIONS OF LAWS AND ORDINANCES GOVERNING CONDITIONAL USES. ALL OTHER APPLICABLE MORROW CITY CODES SHALL BE COMPLIED WITH.

 Signature of Applicant/Business Owner

 Signature of Individual Representing Business Owner

 Notary Signature

Notary Stamp:

(For Office Use Only)

Total Amount Paid \$ 650.00 Check # _____ Received by: _____ (FEES ARE NON-REFUNDABLE)

Zoning Verified: _____ Application checked by: _____ Date: _____

Date of P+Z Board/City Council: _____ P+Z Board/City Council Decision: _____



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- **The Planning+Zoning Board meets the 3rd Tuesday of every month at 6:00 p.m.**
- **The Morrow City Council meets every 2nd and 4th Tuesday at 7:30 p.m.**

**For questions regarding the Conditional Use/Variance process, please contact:
Yasmin Julio, Planning Tech
Community Development Department
678.902.0924 (direct line)**