



**SPECIAL USE PERMIT APPLICATION**  
**MOULTRIE-COLQUITT COUNTY**  
**PLANNING COMMISSION**  
200 1st Street N.E., Moultrie, GA 31768  
P: 229-668-7223 F: 229-668-7650  
[www.moultriega.com](http://www.moultriega.com)

*Please type or print application.*

**Property Information**

Date: \_\_\_\_\_ Parcel ID: \_\_\_\_\_ Land Lot No.: \_\_\_\_\_ of the 8th Land District of Colquitt County, Georgia.

Address of Property: \_\_\_\_\_

City: \_\_\_\_\_ State: GA Zip: \_\_\_\_\_

Current Zoning Article No.: \_\_\_\_\_ Current Zoning District: \_\_\_\_\_

This Property is located on the \_\_\_\_\_ side of \_\_\_\_\_ and lies  
*North/South/East/West* *Street Name*

between \_\_\_\_\_ and \_\_\_\_\_  
*Street Name* *Street Name*

Lot Frontage: \_\_\_\_\_ Lot Depth: \_\_\_\_\_ Square Footage: \_\_\_\_\_ Acreage: \_\_\_\_\_  
*Feet* *Feet*

Unimproved Improved Residential Commercial Industrial

**Please respond to the following standards in the space provided or use attachments as necessary:**

1. Will this proposed special use permit, permit a use that is suitable given the use and development of adjacent and nearby property?

Yes No

Explain: \_\_\_\_\_  
\_\_\_\_\_

2. Will the proposed special use permit adversely affect the existing use or usability of adjacent or nearby property?

Yes No

Explain: \_\_\_\_\_  
\_\_\_\_\_

3. Will the property to be affected by a proposed special use permit have reasonable economic use as currently zoned?

Yes No

Explain: \_\_\_\_\_  
\_\_\_\_\_

4. Will the proposed special use permit result in a use that could cause excessive or burdensome use of existing streets, transportation facilities, utilities, or schools?

Yes No

Explain: \_\_\_\_\_  
\_\_\_\_\_

5. Will the proposed special use permit conform with the policy and intent of the Comprehensive Plan and Future Use Map?

Yes No

Explain: \_\_\_\_\_

6. Are there other existing or changing conditions that affect the use and development of the property that give supporting grounds to either approve or not approve the proposed special use permit?

Yes No

Explain: \_\_\_\_\_

7. What is the purpose for this rezoning request?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Property Owner(s)**

Property Owner: \_\_\_\_\_

Property Owner's Current Mailing Address: \_\_\_\_\_

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

Property Owner's Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**Agent/Contact Person**

Name/Firm: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

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

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**Campaign Contribution**

Owner/Agent

*In the last year, have you (Owner and or Agent) contributed more than \$250.00 to the campaign of a local elected official?  
Yes No If Yes attach a disclosure report with the City of Moultrie. The name and official position of the local government official to whom the campaign contribution was made; and the dollar amount and description of each campaign contribution made by the applicant to the local government official during the two years immediately preceding the filing of the application for the rezoning action and the date of each such contribution.*

**Application must be filed by the second Friday of the month prior to the next scheduled Moultrie-Colquitt County Planning Commission Meeting. The Moultrie-Colquitt County Planning Commission meets the second Monday of every month at 6:00 p.m. in the City of Moultrie Municipal Building. For additional information, contact the City of Moultrie Planning & Community Development Department at (229) 668-7223**

**Applicant Affidavit**

Personally appeared before me \_\_\_\_\_ who on oath deposes and states that the  
*(Applicant's Name)*  
information contained in this application is true to the best of his/her knowledge and belief:

\_\_\_\_\_  
Notary Public

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name

**Owner Affidavit**

Personally appeared before me \_\_\_\_\_ who on oath agrees with the rezoning  
*(Property Owner(s) Name)*  
request and states that the information contained in this application is true to the best of his/her knowledge and belief:

\_\_\_\_\_  
Notary Public

\_\_\_\_\_  
Signature of Owner (1)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature of Owner (2)

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature of Owner (3)

\_\_\_\_\_  
Print Name

**Required Paperwork**

Warranty Deed with legal description granting title to current owner

Plan review, if needed

Surveyed Plat of the property

Site plan drawn to scale

The locations and dimensions of each building and the square footage of each building or each use

The layout and location of off-street parking, total number of spaces. Ingress and egress location and dimensions, driving lanes, pedestrian ways, sidewalk, curb lines, loading and unloading zones and screening walls, if required

Proposed method of water supply, sewage disposal, and storm drainage

All proposed uses of the property to be developed

Typical elevations front, side, and rear of all buildings to be developed

\$400 fee required, made payable to the City of Moultrie

Other documents