



## **Public Hearing Packet**

**Map Amendment (Rezoning), Text Amendment,  
Variance and/or Board of Zoning Appeals**

**Zoning Administrator: (912) 756-3735**



## **RICHMOND HILL PUBLIC HEARING PROCESS**

**This is a brief overview of the Public Hearing Process for the City of Richmond Hill. For more detailed information about the process, contact the Zoning Administrator (912)756-3735**

- 1) Fill out the application packet completely and return it with the applicable fee.
- 2) Upon receipt of the completed application, the Zoning Administrator will schedule the Public Hearing. Public Hearings for map/text amendments are held during Planning Commission meetings on the 2<sup>nd</sup> and 4<sup>th</sup> Mondays of the month at 7:00 pm. Public Hearings for a variance request and/or appeals are held by the Board of Zoning Appeals. The City Council acts as the Board of Zoning Appeals and holds their meetings on the 1<sup>st</sup> and 3<sup>rd</sup> Tuesdays of the month at 7:30pm. All meetings are held in the council chambers of City Hall.
- 3) A legal advertisement will be placed in the local newspaper by the City not less than 15 days and not more than 45 days prior to the Public Hearing. A Public Hearing Notice sign will be placed on the property not less than 15 days prior to the Public Hearing.
- 4) The City will notify by mail all property owners within 300 feet of the affected property of the Public Hearing at least 7 days but not more than 45 days before the Public Hearing.
- 5) During a Public Hearing, the applicant shall be recognized and permitted to present their request. Anyone who wants to speak for or against the request must sign in upon entering the council chambers. Only people who sign in will be allowed to speak. After those who have signed in have spoken, the applicant can make summary remarks. The Public Hearing will then be brought to a close. No questions will be asked of the applicant at this time.
- 6) After the Public Hearing, the regular meeting will begin. The applicant shall be recognized and permitted to present their request and answer questions. When the question/answer period is over, the map/text amendment will be voted on by the Planning Commission for a recommendation to City Council for approval or denial. City Council will hold a First Reading at the next scheduled City Council meeting. They will vote to approve, deny or table the request at the following City Council meeting. In the case of a Variance request and/or appeals, the City Council will vote to approve, deny or table the request, after closing the Public Hearing.
- 7) Once the City Council considers and acts on the zoning request and/or appeals, the applicant will be notified by mail of the decision for his/her records.
- 8)

## Public Hearing Checklist

Complete the check list by checking “Yes” or “N/A” for not applicable under the correct corresponding box. Then print, sign, and date the check list signifying that you have returned the required documents and have paid the fee.

YES	N/A	CHECK LIST ITEM	Pg #
		I have read the RH Public Hearing Process Sheet	2
		I have read the Public Hearing Information Sheet	4
		I have completed the Map Amendment (Rezoning) Application	5
		I have completed the Text Amendment Application	6
		I have completed the Variance Application	7
		I have read the Variance Decisions Sheet	8
		I have completed the Board of Zoning Appeals Application	9
		I have read the Board of Zoning Appeals Powers and Duties Sheet	10
		I have completed the Conflict of Interest-Campaign Disclosure Form	11
		I have completed the Certification by Applicant and Owner Form	12
		I have a check payable to City of Richmond Hill for fee(s)	*

*I have read and understand the information and instructions for applying for a map amendment (rezoning), text amendment and/or variance. I understand that property owners within 300 feet of the affected property will be notified. I further understand that while this application will be carefully reviewed and considered, the burden of providing the need for the proposed amendment and/or variance rests with the applicant. I further understand that if approved, this authorization for a variance, if applicable, shall be void after one (1) year unless substantial steps have been taken toward effecting the variance.*

\_\_\_\_\_  
PRINT NAME

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE

## **PUBLIC HEARING INFORMATION & INSTRUCTIONS**

Below are instructions for applying for a Public Hearing for a Map Amendment (Rezoning), Text Amendment, Variance and/or Board of Zoning Appeals

### **What is a Map Amendment (Rezoning)?**

A map amendment (rezoning) is an amendment to the official zoning map which rezones property from one zoning classification to another.

**If you are applying for a map amendment, complete pages: 3, 5, 11, and 12**

### **What is a Text Amendment?**

A text amendment is an amendment to change or add text to the Unified Development Ordinance (UDO).

**If you are applying for a text amendment, complete pages: 3, 6, 11, and 12**

### **What is a Variance?**

A variance is a request for a deviation from the strict application of the provisions in the UDO.

**If you are applying for a variance, complete pages: 3, 7, 11, and 12**

### **What is the Board of Zoning Appeals?**

The Board of Appeals listens to and makes decisions on appeals from applicants that are not satisfied with the final decisions rendered from: City Staff, ARB and/or Planning Commission

**If you are applying for an appeal, complete pages: 3, 9, 11, and 12**

### **How to apply:**

Submit a completed Public Hearing Application Packet from the Richmond Hill Planning and Zoning Department located at 85 Richard Davis Drive, Richmond Hill, Georgia. The Zoning Administrator will schedule dates for the request to go before the Planning Commission and/or City Council. For more detailed information on the Public Hearing Process see page 2.

### **Application Fees:**

The application fee for a map amendment (rezoning) is based on the acreage of the property requested for the amendment. The other requests are flat fees. Listed below are the fees you will have to pay for your application to be processed. Fees are non-refundable.

<b>MAP AMENDMENT (REZONING)</b>	<b>\$500 + \$10 per acre (\$2500 Max)</b>
<b>TEXT AMENDMENT</b>	<b>\$300</b>
<b>VARIANCE</b>	<b>\$150</b>
<b>BOARD OF APPEALS</b>	<b>\$150</b>

### **Where do Public Hearings take place?**

Public Hearings for map/text amendments are held during Planning Commission meetings on the 2<sup>nd</sup> and 4<sup>th</sup> Mondays of the month at 7:00 pm. Public Hearings for a variance request are held by the Board of Zoning Appeals. The City Council acts as the Board of Zoning Appeals and holds their meetings on the 1<sup>st</sup> and 3<sup>rd</sup> Tuesdays of the month at 7:30pm. All meetings are held in the council chambers of City Hall.

### **Notification of Public Hearing:**

Upon receipt of completed application, a legal ad will be placed in the local newspaper not less than (15) days prior to the Public Hearing, a sign will be placed on the affected property not less than (15) days prior to the Public Hearing, and property owners within 300 feet of the affected property will be notified by mail not less than (7) days before the public hearing.



File #:	_____
PH Date:	_____
Fee:	_____
APPROVED?	
PC: Yes	____ No ____ Date _____
CC: Yes	____ No ____ Date _____

**MAP AMENDMENT (REZONING) APPLICATION**

NOT APPLICABLE

APPLICANT: \_\_\_\_\_ PHONE: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

EMAIL: \_\_\_\_\_

1) Property address: \_\_\_\_\_

2) Plat reference: Map number \_\_\_\_\_ Parcel number \_\_\_\_\_

3) Size of property: \_\_\_\_\_ (acres)

4) Property currently zoned? Check one.

- R-1     PUD     C-1     Unincorporated Area
- R-2     I-1     C-2
- R-3     MU-1     C-3
- R-4     MU-2     C-P

5) Proposed zoning? Check one.

- R-1     PUD     C-1
- R-2     I-1     C-2
- R-3     MU-1     C-3
- R-4     MU-2     C-P

6) Do you own all of the property for this proposed rezoning?     Yes     No

7) If not, list owner: \_\_\_\_\_ Phone: \_\_\_\_\_

Mailing address: \_\_\_\_\_



File #:	_____		
PH Date:	_____		
Fee:	_____		
APPROVED?			
PC: Yes	____ No	____ Date	_____
CC: Yes	____ No	____ Date	_____

**TEXT AMENDMENT APPLICATION**

NOT APPLICABLE

**APPLICANT:** \_\_\_\_\_ **PHONE:** \_\_\_\_\_

**MAILING ADDRESS:** \_\_\_\_\_

**EMAIL:** \_\_\_\_\_

1) Property address: \_\_\_\_\_

2) Plat reference: Map number \_\_\_\_\_ Parcel number \_\_\_\_\_

3) What article (s) and/or section(s) of the Unified Development Ordinance will be affected?

Article(s): \_\_\_\_\_

Section(s): \_\_\_\_\_

4) Explain the reason for your request. Attach additional pages if necessary.

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

5) Do you own all of the property for this request?  Yes  No

6) If not, list owner: \_\_\_\_\_ Phone: \_\_\_\_\_

Mailing address: \_\_\_\_\_



File #:	_____
PH Date:	_____
Fee:	_____
APPROVED?	
CC: Yes	____ No ____ Date _____

**VARIANCE APPLICATION**

NOT APPLICABLE

**APPLICANT:** \_\_\_\_\_ **PHONE:** \_\_\_\_\_

**MAILING ADDRESS:** \_\_\_\_\_

**EMAIL:** \_\_\_\_\_

1) Property address: \_\_\_\_\_

2) Plat reference: Map number \_\_\_\_\_ Parcel number \_\_\_\_\_

3) Variance request to the Unified Development Ordinance:  
ARTICLE: \_\_\_\_\_ SECTION: \_\_\_\_\_

4) Describe the reason for the variance. Attach additional pages if necessary:  
\_\_\_\_\_  
\_\_\_\_\_

5) The following hardship would be created without a variance. Attach additional pages if necessary:  
\_\_\_\_\_  
\_\_\_\_\_

6) The following conditions exist which would allow this variance to be considered. Attach additional pages if necessary: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## **VARIANCE DECISIONS**

### **Standards for Variances (At least two of the following):**

- A. That there are unique physical circumstances or conditions beyond that of surrounding properties, including: irregularity, narrowness, or shallowness of the lot size or shape, or exceptional topographical or other physical conditions, peculiar to the particular property.
- B. That because of such physical circumstances or conditions, the property cannot be developed in strict conformity with the provisions of the zoning ordinance without undue hardship to the property.
- C. That granting the variance will not result in authorization of a use not otherwise permitted in the district in which the property is located or cause substantial detriment to the public good.

**For residential height variances:** The petitioner shall be required to add two (2) feet to each side yard set back for each one (1) foot above 35 feet in height and if the rear yard abuts a side yard of the adjacent lot the same added setback requirements shall apply. In addition, safe-guards consisting of sprinkler systems, smoke detectors and any other fire protection equipment deemed necessary at the time by the board shall be installed.

**Permit longevity:** Unless otherwise specifically provided by the board as a condition of approval, any variance granted by the board shall automatically become null and void after a period of 12 months from the date granted, unless the owner or his/her agent has demonstrated that substantial steps have been taken toward effecting the variance. Building permits shall only be granted for plans consistent with the approved application. Any deviation from the information submitted will require a new public hearing and approval by the board.





**BOARD OF ZONING APPEALS APPLICATION**

**APPLICANT:** \_\_\_\_\_ **PHONE:** \_\_\_\_\_

**MAILING ADDRESS:** \_\_\_\_\_

**EMAIL:** \_\_\_\_\_

**Topic of Appeal:**    Staff Decision       ARB Decision       Planning Commission Decision

1) Project address: \_\_\_\_\_

2) Plat reference: Map number: \_\_\_\_\_ Parcel number: \_\_\_\_\_ Zoning District: \_\_\_\_\_

3) Application Fee: \$150.00

4) Describe grounds for appeal: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

*An appeal may be filed by any person, affected or aggrieved. Notice of the appeal shall be filed with the zoning administrator specifying the grounds for the appeal, and shall be filed within 15 calendar days after the order, requirements, decision or determination appealed from is made.*

\_\_\_\_\_

Print Name	Signature	Date
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-----DO NOT FILL IN BELOW THIS LINE-----FOR STAFF USE ONLY-----

Public Hearing Date: \_\_\_\_\_

Board of Zoning Appeals Decision: \_\_\_\_\_

\_\_\_\_\_

**BOARD OF ZONING APPEALS  
POWERS AND DUTIES**

**UDO Section 29.3 Powers and Duties**

A. The board of zoning appeals, in conformity with the provisions of this article may reverse or affirm, wholly or in part, or may modify any order, requirements, decision or determination appealed from, and shall make such order, requirement, decision or determination as in its opinion ought to be made in the premises, and to that end shall have all the powers to hear and decide all matters referred to it or upon which it is required to pass under this article.

B. The provisions of this article are to be construed as consistent with the applicable provisions of the relevant statutes of the State of Georgia In the event of a conflict between the provisions of this article and other statutory provisions, the statutory provisions are to prevail.

C. The board, after public hearing, shall have the power to decide applications related to the following:

1. Where it is alleged by the appellant that there is error or misinterpretation in any order, requirement, decision, grant or refusal made by the zoning administrator, other administrative officer or body in the carrying out or enforcement of the provisions of this ordinance.

2. Where by reason of the exceptional narrowness, shallowness or shape of a specific piece of property, or by reason of exceptional topographic conditions, or other extraordinary situation or condition of the land, building or structure, or of the use or development of property immediately adjoining the property in question, the literal enforcement of the requirements of this ordinance would involve practical difficulties or would cause undue hardship.

3. Where there are practical difficulties or unnecessary hardship in the way of carrying out the strict letter of this ordinance relating to the construction, structural changes in equipment, or alterations of building or structures, or the use of land, building or structures so that the spirit of this ordinance shall be observed, public safety secured, and substantial justice done.



## CONFLICT OF INTEREST IN ZONING ACTIONS

### DISCLOSURE OF CAMPAIGN CONTRIBUTIONS:

Has the applicant and/or the applicant’s attorney, within the past two (2) years, made campaign contributions or made gifts having an aggregate value of **\$250.00** or more to a member of the Richmond Hill Planning Commission or the Richmond Hill City Council or the any local government official who will be considering the zoning action? Check one.

**YES**                       **NO**

If YES, please complete the following. Attach additional pages if necessary.

NAME OF GOVERNMENT OFFICIAL	CONTRIBUTION/ GIFT	DATE OF GIFT
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NAME OF GOVERNMENT OFFICIAL	CONTRIBUTION/ GIFT	DATE OF GIFT
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NAME OF GOVERNMENT OFFICIAL	CONTRIBUTION/ GIFT	DATE OF GIFT
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NAME OF GOVERNMENT OFFICIAL	CONTRIBUTION/ GIFT	DATE OF GIFT
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NAME OF GOVERNMENT OFFICIAL	CONTRIBUTION/ GIFT	DATE OF GIFT
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I (We) the undersigned, having made application for a zoning action, do hereby declare that I (We) have reviewed and complied with Chapter 67A of Title 36 of the Official Cod of Georgia entitled “Conflict of Interest in Zoning Actions,” to the best of my knowledge.

\_\_\_\_\_  
PROPERTY OWNER PRINTED NAME

\_\_\_\_\_  
AGENT/APPLICANT PRINTED NAME

\_\_\_\_\_  
PROPERTY OWNER SIGNATURE

\_\_\_\_\_  
AGENT/APPLICANT SIGNATURE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
DATE

Property Address for Zoning Action: \_\_\_\_\_



**CERTIFICATION BY OWNER OR APPLICANT**

**I, the undersigned, do hereby certify under penalty of perjury that I am the owner of the lands described within the foregoing application, and that the agent/applicant stated below is authorized by this owner to apply for the request in this application.**

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**PRINT OWNER NAME**

**PHONE**

---

**EMAIL**

---

**SIGNATURE**

**DATE**

---

**PRINT AGENT/APPLICANT NAME**

**PHONE**

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**AGENT/APPLICANT EMAIL**