

APPLICATION FOR ANNEXATION

CITY OF HOSCHTON, GA
PLANNING AND DEVELOPMENT
79 City Square
Hoschton, GA 30548
706-654-3034

Applicant Information:

Name:

Address:

City, State, Zip:

Phone:

E-mail:

Property Owner Information: (if different from applicant)

Name:

Address:

City, State, Zip:

Phone:

E-mail:

The property owner, must sign the following form; if the applicant is not the property owner, you must submit evidence of property owner approval to file this application by submitting the property owner authorization form.

Property Information:

Tax Map and Parcel Number:

Address (if one has been assigned):

Acreage of Property:

Note: You must attach a metes and bounds legal description of the property. A boundary survey may be required; submit a copy if available.

Existing Zoning District:

Proposed Zoning District:

Existing Use:

Property Owner Authorization

I swear that I am the owner of the property which is the subject matter of this application, as shown in the records of Jackson County, Georgia.

Name of Owner(s):

Address:

Phone Number:

Signature of Property Owner:

I authorize the person named below to act as applicant in the pursuit of this application.

Name of Applicant(s):

Address:

Phone Number:

Property owner personally appeared before me

who swears that the information contained in this authorization is true and correct to the best of his or her knowledge and belief.

Notary Public

Date

To complete your application, attach/submit the following in addition to this completed form:

- _____ **Application fee** as established by resolution of the City Council (see fee schedule). Make check payable to the City of Hoschton.
- _____ **Metes and bounds legal description** of the property.
- _____ **Boundary survey plat** of the property; provided, however, that where no survey is available the Zoning Administrator may but is not obligated to, accept a map of the subject property from the Jackson County Tax Assessors or other reliable source.
- _____ **Application for Rezoning** – a completed application for rezoning must also be submitted.

Please be advised of the following procedures applicable to annexation and zoning:

The zoning administrator will determine whether the application is complete (incomplete applications will not be processed). Public notice of meetings (including sign on property and newspaper notice) of completed applications will be accomplished by the city. A staff report and recommendation will be prepared by the zoning administrator and submitted to the Hoschton Planning and Zoning Commission (which meets once a month) and Hoschton Mayor and City Council (regularly meets once monthly). The Planning and Zoning Commission will make a recommendation on the application, but the final decision is by the Hoschton City Council. Applicants are required to attend the Planning and Zoning Commission meeting and public hearing before the Mayor and City Council. Contact the zoning administrator for specific dates at which your application will be considered.

FOR OFFICE USE ONLY:	
_____ : APPROVED	_____ : DENIED
AMOUNT PAID: _____	DATE: _____
FORM OF PAYMENT: <input type="checkbox"/> CHECK # _____	<input type="checkbox"/> CREDIT CARD <input type="checkbox"/> CASH