



APPLICATION

[TEXT AMENDMENT]

CITY OF COLUMBUS, GEORGIA
DEPARTMENT OF PLANNING
420 10TH Street
COLUMBUS, GEORGIA 31901

Last Updated: June 2019

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TEXT AMENDMENT INSTRUCTIONS

The accompanying application package must be completed in full in order to be accepted. Applications are only accepted on deadlines as outlined on the City of Columbus Planning Advisory Commission Schedule. A pre-application conference with staff is recommended to insure that all information is submitted correctly with the application. Additional information may be requested during the pre-application conference and during the application review process. Please attach additional pages where necessary to identify all requested information clearly.

Application for Text Amendment

- 1. Applicant Information:** The names and addresses of all applicants should be listed here.
- 2. Applicant Requests:** A request to amend the Unified Development Ordinance (UDO) should be based upon the Comprehensive Plan and must have sound reasons that indicate why the current zoning should be changed. It is up to the applicant to make the case for the change.
- 3. Applicant Explanation:** Please provide a brief description of what hardship this request will address and why it should be considered for change.

Additional Information

The fee for a text amendment application is below. If the fee is paid by check or money order, please make it payable to the Columbus Consolidated Government. The fee shall not be refundable after the application has been submitted. No application will be processed until all items on the form have been completed to the satisfaction of the Columbus Consolidated Government. The applicant or his/her appointed representative must be present at the Planning Advisory Commission meeting and the Public Hearing before City Council.

Fee Schedule

Text Amendment..... \$1000*

***All credit/debit cards transactions will incur a processing fee of 2.5% + \$1.00.**

TEXT AMENDMENT APPLICATION

Application Date: _____

Case Number: _____

Applicant Information

Name: _____

Address: _____

Email: _____

Phone Number: _____

Fax Number: _____

The Applicant Hereby Requests that the following section(s) of the UDO be amended:

Explanation of the proposed change: _____

I have read this application, understand its intention, and freely consent to its filing. Furthermore, I have the power to authorize and hereby grant permission to the Columbus Consolidated Government officials and other authorized government officials on official business to enter the property as necessary to process this application.

Signed this ____ day of _____, 20____.

Signature of the Applicant

Print Name