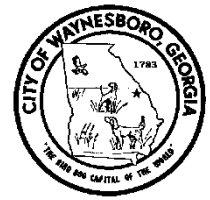


**City of Waynesboro**  
**Planning and Development Department**  
**Petition of Zoning Map Amendment**



**1. Applicant:**

Name \_\_\_\_\_ Phone: \_\_\_\_\_

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

**2. Owner (if other than applicant):**

Name \_\_\_\_\_ Phone: \_\_\_\_\_

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

**3. The Legal description of property:**

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

Map & Parcel No. \_\_\_\_\_ | Lot(s) \_\_\_\_\_ Block(s) \_\_\_\_\_ Addition \_\_\_\_\_

**4. The present Zoning of the above property is:** \_\_\_\_\_

**5. Proposed Zoning is** \_\_\_\_\_

**6. Description and Reason for Request (Attach additional information if necessary)** \_\_\_\_\_

**7. Attached hereto and make a part of this application, I submit the following:**

- A scale drawing of the property showing the actual shape, location and dimension of the property;
- Any easements which may be in effect on the property;
- A copy of any deed restrictions which may limit the use or development of the property.

**I hereby depose and say that all the above statements contained in the submitted application are true.**

\_\_\_\_\_  
*Signature of Applicant* \_\_\_\_\_ *Date*

**For More Information Contact:**  
**CITY OF WAYNESBORO**  
**PLANNING & DEVELOPMENT DEPARTMENT**  
 620 BARRON ST WAYNESBORO, GA 30830  
 TRINETTA SKINNER (706)360.2072  
 COMMUNITY DEVELOPMENT DIRECTOR  
 SHELLEY BROXTON ADMINISTRATIVE ASSISTANT  
 PHONE: (706)554.8006 FAX: (706)554.8981

**FOR CITY USE ONLY**

**\$100.00 APPLICATION FEE PAID** \_\_\_\_\_

**Date filed with City Administration** \_\_\_\_\_

**Date heard by Planning Commission** \_\_\_\_\_

**Planning Commission Recommendation** \_\_\_\_\_

**City Council Public Hearing Date** \_\_\_\_\_

**City Council Decision** \_\_\_\_\_

*Make all checks payable to the City of Waynesboro*

“THE BIRD DOG CAPITAL OF THE WORLD”