

**THE DALTON - WHITFIELD PLANNING OFFICE  
APPLICATION FOR CITY OR COUNTY ZONING APPEAL**

**Date Received:**

**County Fee: \$50.00  
City Fee: \$20.00**

**Name of Applicant:**

**Telephone:**

**Mailing Address:**

**Name of Property Owner:**

**Telephone:**

**Address of Property:**

**Tax Parcel Number:**

**Zoning Classification:**

**Number of buildings now on property:**

**Describe each building as requested below:**

<b>Type</b>	<b>Use</b>	<b>Size</b>
1.	1.	1.
2.	2.	2.
3.	3.	3.

**Reason for Appeal:**

***Additionally, Please Fully Answer All Questions on the Following Page***

**FOR OFFICE USE ONLY:**

DATE OF HEARING: \_\_/\_\_/\_\_

DATE PROPERTY POSTED: \_\_/\_\_/\_\_

DATE ADVERTISED: \_\_/\_\_/\_\_

DECISION OF BOARD \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

VOTE: \_\_\_\_\_

*NOTE: If you are applying due to a health related hardship, you are required to provide verifying documentation from a physician.*

**In order to grant a variance, the Zoning Board of Appeals must find that all of the following conditions are met.**

Please fully answer the statements below:

(1) There are extraordinary and exceptional conditions pertaining to the particular piece of property in question because of its size, shape, or topography.

(2) The application of this Ordinance to the particular piece of property would create an unnecessary hardship.

(3) Such conditions are peculiar to the particular piece of property involved.

**(4) Relief, if granted, would not cause substantial detriment to the public good or impair the purposes and intent of this Ordinance, provided, however, that no variance may be granted for the use of land or building or structure which is prohibited by this Ordinance.**

**(5) FOR COUNTY PROPERTIES ONLY: The applicant provides either formal or informal written evidence that the intended use, if a variance were granted, would be allowed, either by the Whitfield County Health Department or Dalton Utilities, as applicable, with respect to wastewater treatment.**