

TEXT AMENDMENT APPLICATION

TO AMEND THE TEXT OF THE ZONING ORDINANCE OF FAYETTE COUNTY, GA

A COMPLETE APPLICATION MUST BE SUBMITTED TO THE PLANNING AND ZONING DEPARTMENT BY 12:00 NOON ON THE TENTH (10th) DAY OF THE MONTH

HEARING SCHEDULE FOR 2023 APPLICATIONS

(Dates are subject to change with notice. If a hearing falls on a holiday, a new hearing date will be announced)

Deadline for application is by 12:00 noon on the tenth (10th) of the month. If the tenth day of the month is on a weekend or holiday, the application filing deadline is extended to the next business day. Text amendment requests require a total of two (2) public hearings: one by the Planning Commission (1st reading and recommendation vote on the 1st Thursday of the month) and another public hearing by the Board of Commissioners (2nd reading and final decision on the 4th Thursday of the month). Both public hearings are held at the Fayette County Administrative Complex at Stonewall (located at the southwest corner of Hwy 54 and GA 85 in downtown Fayetteville) on the first floor in the Public Meeting Room (near the park fountain). Planning commission hearings begin at 7:00 p.m.; and the Board of Commissioners hearings begin at 5:00 p.m.; unless otherwise noted.

APPLICATION FILING DEADLINE (noon) January 10, 2023	PLANNING COMMISSION HEARING DATE (1st Thur.) March 2, 2023	BOARD OF COMMISSIONERS HEARING DATE (4 th Thur.) March 23, 2023
February 10	April 6	April 25
March 10	May 4	May 25
April 10	June 1	June 22
May 10	July 6	July 27
June 12	August 3	August 24
July 10	September 7	September 28
August 10	October 5	October 26
September 11	November 2	December 14, 2023 *
October 10	December 7	January 11, 2024
November 13	January 4, 2024	January 25, 2024
December 11 2023	February 1, 2024	February 2024

^{*} December 2023 Board of Commissioners hearing begins at 2:00 p.m.

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APPLICANT:		_
MAILING ADDRESS:		
PHONE:	FAX:	
E-MAIL:		
NOTARY PUBLIC	APPLICANT'S SIGNATURE	
	STAFF): PETITION NUMBER:	
	Date: ting documentation is Sufficient and Complete	
by Staff:	Date: HEARING:	
DATE OF COUNTY COMMISSIONER Received from application filing fee.	S HEARING: a check in the amount of \$	for
Date Paid:	Receipt Number:	

To amend Article	, Section(s)	
PROPOSED WORDIN(sheets if necessary)	G OF TEXT AMENDMENT: (Please type and attach additiona
	, Section(s)	
To amend Article		
REASON FOR SEEKIN	NG AMENDMENT: (Please typ	e and attach additional sheets