

## Committee Members

Sara Kantala (Chair)

Lonnie Blackwell

Walton Howell

Jim Stovall

## Contact Information

Niles Poole, Zoning  
Compliance or Jeff Algood,  
City Marshal at 706-213-3100

Clerical Support

Cindy Churney, City Clerk,  
706-213-3100,  
[admin@cityofelberton.net](mailto:admin@cityofelberton.net)

## Monthly Meeting Schedule

3rd Monday of each month at  
1:00 p.m. *(meets only if  
application to consider)*

# Planning Commission

**City of Elberton  
PO Box 70  
203 Elbert St  
Elberton, GA  
30635**

**FAX: 706-213-3125**

Applications are available at:  
[www.cityofelberton.net](http://www.cityofelberton.net)  
(Planning & Zoning).

**Elberton Planning Commission**  
P. O. Box 70, 203 Elbert Street, Elberton, Georgia 30635  
Phone: 706-213-3100 ~ Fax: 706-213-3125  
Niles T. Poole, Zoning Administrator  
[admin@cityofelberton.net](mailto:admin@cityofelberton.net) ~ [www.cityofelberton.net](http://www.cityofelberton.net)



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## APPLICATION FOR CONSIDERATION

### **Section 1. General Information:**

Name of Applicant: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Contact Number(s): \_\_\_\_\_

Location of Property: \_\_\_\_\_

(include street address, if available)

Relationship of applicant to property (lessee, owner, purchaser): \_\_\_\_\_

The commission is being asked to consider (detailed description of plan/project/request):

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Is there an application relevant to this property pending before the Elberton City Council, Zoning Board of Adjustments, Historic Preservation and/or any other regulatory or administrative authority, which may have a bearing on the subject of this application?  No  Yes (explain) \_\_\_\_\_

Who will represent the applicant at the meeting (include name and relationship to applicant)?

**Section 2. Required Information:** (failure to submit required attachments will prevent application from being considered by the commission).

- Legal Description of Property:  Attached
- Copy of Plat (showing dimensions, acreage, landscape architect or land surveyor whose state registration is current and valid and whose seal shall be affixed to the plat):  Attached
- Copy of the deed that reflects the current owner(s) of the property:  Attached
- Application Fee:  \$100 Conditional Uses  \$50 Modular Home  \$200 Zone Change

**Section 3. Applicant/Owner Certification:**

The applicant certifies that all information contained in this application, and all information furnished in support of this application, is true and complete to the best of my knowledge. Should any portion not be true, then the application may be rejected. The owner/applicant hereby gives permission to enter on the property for inspection during the time the application is pending.

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Signature of applicant/agent Date

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Signature of property owner (if applicable) Date

**Note to Applicant:** Commission meets 3<sup>rd</sup> Monday at 1:00 p.m. each month provided an application has been submitted by the deadline (no more than 45 days and at least 15 days prior to hearing/meeting). Submit information to Zoning Administrator at address above either by fax, mail or hand delivery. **Zoning guidelines are located at [www.cityofelberton.net](http://www.cityofelberton.net) (Planning & Zoning)**

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**TO BE COMPLETED BY STAFF ONLY:**

Date application received: Received by:

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Attachments included:  Yes  No (explanation)

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Application fee included:  Yes  No (explanation)

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Date of EPC Meeting: Date of Council Meeting:

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*The City of Elberton reserves the right to obtain additional information that reasonably may be required in order that an informed decision may be made.*