



TEXT AMENDMENT APPLICATION

APPLICATION TO AMEND THE TEXT OF THE UNIFIED DEVELOPMENT ORDINANCE
FOR THE CITY OF SNELLVILLE, GEORGIA

City of Snellville
Planning & Development Department

2342 Oak Road, 2nd Floor

Snellville, GA 30078

Phone 770.985.3515 website: www.snellville.org

DATE RECEIVED: _____

CASE # **UDO** _____

Version 4-1-2025

Applicant is: ☐ Snellville Property Owner ☐ Snellville Business Owner ☐ Real Estate Developer ☐ Attorney
☐ Snellville Citizen ☐ Other (describe): _____

Name (please print)

Title

Street Address

Phone (wk)

Phone (cell)

Mailing Address

E-mail Address

City, State, Zip Code

I HEREBY SUBMIT THIS APPLICATION AND REQUEST TO AMEND THE TEXT OF THE CITY OF SNELLVILLE UNIFIED DEVELOPMENT ORDINANCE:

CHAPTER NO.: _____ ARTICLE NO.: _____ SECTION NO.: _____ SECTION TITLE: _____

BRIEFLY DESCRIBE THE PROPOSED TEXT AMENDMENT: _____

UDO Sec. 103-9.4.A. UDO Text Amendments (must include):

- ☐ Payment of the \$350 text amendment application fee and legal ad fee (two ads).
- ☐ Name and address of the applicant.
- ☐ Current provisions of text to be affected by the proposed amendment.
- ☐ The proposed wording of text change.
- ☐ Letter of Intent explaining the reason for the proposed text amendment.
- ☐ Applicant's certification.
- ☐ Conflict of interest certification and disclose of campaign contributions.
- ☐ Ten (10) stapled or bound copies of the application and all supporting documents.
- ☐ One (1) unbound application bearing original notarized signatures.
- ☐ A .pdf format of all submitted materials using USB flash-drive or email.

**APPLICATION SUBMITTAL DEADLINE IS 6-WEEKS BEFORE THE
PLANNING COMMISSION REGULAR MEETING DATE**

SEE PUBLIC HEARING CALENDAR

CERTIFICATIONS

APPLICANT'S CERTIFICATION

The undersigned below does hereby, swear or affirm under penalty of perjury under the laws of the State of Georgia, has a valid interest in the city and is authorized to make this application to amend the text of the City of Snellville Unified Development Ordinance and that the statements and documents submitted as part of this application are true and accurate to the best of my knowledge or belief.

Signature of Applicant

Date

Type or Print Name and Title

Affix Notary Seal

Signature of Notary Public

Date

CONFLICT OF INTEREST CERTIFICATIONS

The undersigned below, making application for to amend the text of the City of Snellville Unified Development Ordinance, has complied with the Official Code of Georgia Section 36-67A-1, et. seq., Conflict of Interest in Zoning Actions, and has submitted or attached the required information on forms provided.

☐ check here if there are additional applicants and attach additional "Conflict of Interest Certification" sheets.

Signature of Applicant	Date
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Type or Print Name and Title

Signature of Applicant's Attorney or Representative	Date
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Type or Print Name and Title

Signature of Notary Public _____ Date _____

Affix Notary Seal

DISCLOSURE OF CAMPAIGN CONTRIBUTIONS

Have you, within the last two (2) years immediately preceding the filing of this application, made campaign contributions aggregating \$250.00 or more or made gifts having in the aggregate a value of \$250.00 or more to any member of the Mayor and City Council or any member of the Snellville Planning Commission?

☐ YES ☐ NO YOUR NAME: _____

If the answer above is YES, please complete the following section:

[illegible]

☐ Check here and attach additional sheets if necessary to disclose or describe all contributions or gifts.