

Development Services Center 178 Sams Street Decatur, GA 30030 www.dekalbcountyga.gov/planning 404-371-2155 (o); 404-371-4556 (f)

Chief Executive Officer
Michael Thurmond

DEPARTMENT OF PLANNING & SUSTAINABILITY

Interim Director Cedric Hudson

ZONING BOARD OF APPEALS APPLICATION FOR PUBLIC HEARING (VARIANCES, SPECIAL EXCEPTIONS, APPEALS OF ADMINISTRATIVE DECISIONS)

Applicant and/or Authorized Representative:				
Mailing Address:				
City/State/Zip Code:				
Email:				
Telephone Home:	ephone Home: Business:			
	OWNER OF RECOR	D OF SUBJECT PROPER	TY	
Owner:				
Address (Mailing):				
Email:	Telephone Home:		Business:	
	ADDRESS/LOCATIO	ON OF SUBJECT PROPER	TY	
Address:		City:	State:	Zip:
District(s):	Land Lot(s):	Block:	Parcel:	
Zoning Classificatio	n: (Commission District & Supe	er District:	
CHECK TYPE OF HEARING	REQUESTED:			
VARIANCE (From D	evelopment Standards ca	using undue hardship upon	owners of property.)	
SPECIAL EXCEPTION	ONS (To reduce or waive	off-street parking or loading	space requirements.)	
OFFICIAL APPEAL	OF ADMINISTRATIVE DE	ECISIONS.		

PLEASE REVIEW THE FILING GUIDELINES ON PAGE 4. FAILURE TO FOLLOW GUIDELINES MAY RESULT IN SCHEDULING DELAYS.

Email plansustain@dekalbcountyga.gov with any questions.

DEPARTMENT OF PLANNING & SUSTAINABILITY

ZONING BOARD OF APPEALS APPLICATION

AUTHORIZATION OF THE PROPERTY OWNER

I hereby authorize the staff and members of the Zoning Board of Appeals to inspect the premises of the Subject Property.

I hereby certify that the information provided in the application is true and correct.

I hereby certify that I am the owner of the property subject to the application.

DATE:	Applicant
DATE:	ApplicantSignature:



ZONING BOARD OF APPEALS APPLICATION

AUTHORIZATION TO REPRESENT THE PROPERTY OWNER

I hereby authorize the staff and members of the Zoning Board of Appeals to inspect the premises of the Subject Property.

I hereby certify that the information provided in the application is true and correct.

6/24/2024		Langue de la la	
DATE:	Applicant/Agent Signature:	(M) was (and)	
TO WHOM IT MAY CONCERN: Tamara Taitt (I)/ (WE):			
(Name of Owners)			
being (owner/owners) of the prosigned agent/applicant.	perty described below	or attached hereby delegate authority to the above	
Megan Getewood Notary Public	21	Owner Signature	
Notary Public		Owner Signature	
Notary Public Notary Public NOTARY PUBLIC ORIOTROST OCIOTROST OCIOTROST	MACHOOD HOW	Owner Signature	

