**PETITION for the Creation of a Neighborhood Preservation Overlay District**

List all parcels included in the proposed NPOD District boundaries.  **Note that at least 20 contiguous lots of record must be included in the petition.** The petition must be signed by a minimum of 40 percent of the property owners to file for application, and then a minimum of 75 percent of the property owners by time of presentation before City Council at a public hearing.

*Copy the petition form as needed.*

An **Owner Permission Affidavit must be included in the NPOD application for each owner that approves of the application and that signs the petition below.**

**Proposed NPOD District Name** ____________________________

**Petition Form _______ of _________**

<table>
<thead>
<tr>
<th>Parcel Tax ID #</th>
<th>Parcel Address</th>
<th>Name of Owner (printed)</th>
<th>Signature of Owner</th>
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*All signatories to the petition must be real property owners and residing with in the proposed Neighborhood Overlay District.*
PROPERTY INFORMATION

Property # __________ of __________

The Applicant shall complete one page for each property within the proposed boundaries and attach the Owner Permission Affidavit attached to this form for this property. Copy as needed.

<table>
<thead>
<tr>
<th>Property Address/Location</th>
<th>Chamblee, GA</th>
<th>Suite/Apt. #</th>
<th>Zip Code</th>
</tr>
</thead>
</table>

Parcel ID / Property Tax Identification Number

<table>
<thead>
<tr>
<th>Present Use(s)</th>
<th>Present Zoning</th>
<th>Present Character Area (Future Development Map)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Proposed Use(s)</td>
<td>Proposed Zoning</td>
<td></td>
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</tbody>
</table>

Legal description includes:

<table>
<thead>
<tr>
<th>Subdivision Name</th>
<th>Lot #</th>
<th>Block #</th>
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</table>

OR

☐ Indicate here that an exhibit identifying property location is attached.

PROPERTY OWNER

Owner (Person, Firm, Corporation, or Agency)

Company (If applicable)
Owner Permission Affidavit

Subject Property Street Address: __________________________________________________________

Subject Property Tax ID number: 18 - _________ - _____ - _________

Owner:

Name (Person, Firm, Corporation, or Agency): ___________________________________________

Mailing Address: ___________________________________________________________________

________________________________________________________________________________

________________________________________________________________________________

Phone: ___________________________________________________________________________

Email: ___________________________________________________________________________

Property Owner’s Agent (If applicable)

Name (Person, Firm, Corporation, or Agency): ___________________________________________

Mailing Address: ___________________________________________________________________

________________________________________________________________________________

________________________________________________________________________________

Phone: ___________________________________________________________________________

Email: ___________________________________________________________________________

I am applying for, or I hereby give authority to the applicant to file an applicant for: _____________________

____________________________________________________________________________________

Owner/Agent (if applicable) Signature: _______________________________________________________

_____________________________________________________________________________________

Print name of signer(s)

This instrument was signed before me on this date ______________________________________________

County_____________ Georgia Notary Signature:   _____________________________________________

Affix seal/stamp as close to signature as possible