



NEIGHBORHOOD PRESERVATION OVERLAY DISTRICT APPLICATION PACKET

Purpose

Creating a neighborhood preservation overlay district allows neighborhoods an opportunity to ensure that new and remodeled single-family dwellings and related accessory uses and structures are compatible with the height, size and level of forestation of existing dwellings and lots.

Process

1. The Homeowner's Association, neighborhood group or individual can request a Neighborhood preservation overlay district by first calling the development department to arrange a pre-application meeting to review:
 - a. Application Process
 - b. Petition Requirements
2. The applicant can submit an application form and petition with signatures of a minimum of 40% of the property owners residing on the street (s) requesting a Neighborhood preservation overlay district.
3. The Development Director notifies all property owners within the proposed district and within 100 feet of the boundary of subject district of a public meeting in City offices.
4. A public information meeting is held in city offices to inform the public of the implications of the overlay and next steps.
5. The applicant submits a petition with signatures of 75% of the property owners before public hearing.
6. City Manager's Office will schedule a public hearing with the mayor and city council to review the application.
7. The Development Department will conduct a site inspection on all complete applications for a Neighborhood Preservation Overlay District designation and shall investigate and prepare an analysis of such application in substantial compliance for council approval.
8. The City Council will approve or deny the application.

LETTER OF INTENT

Describe the need and purpose for proposed Neighborhood Preservation Overlay District and how the particular properties qualify for a Neighborhood Preservation Overlay District designation. The following criteria shall guide the City Council in deciding if specific properties should be classified as a Neighborhood Preservation Overlay District. Attach additional pages if needed.

- a. Is the built environment of a neighborhood and its location, size or age, one in which it is desirable to ensure that new and remodeled single-family dwellings and related accessory uses and structures are compatible with the height, size, and level of forestation of the existing dwellings and lots?

- b. How was the proposed boundary established?

- c. Is there specific evidence that recent and proposed development patterns in the surrounding area pose a potential threat to the character of a mature neighborhood?

- d. Do the type of additional standards proposed in the Neighborhood Preservation overlay accommodate renewal of the neighborhood while maintaining compatibility of new residential development and improvements to existing homes?

NEIGHBORHOOD PRESERVATION OVERLAY ZONE APPLICATION FOR ZONING MAP AMENDMENT

This page must be completed by the Applicant.

APPLICANT

Name

Mailing Address

Suite/Apt. #

City, State

Zip Code

Primary Phone #

Alternate Phone #

E-mail

MAP CHANGE REQUEST

To create a Neighborhood Preservation Overlay District in the _____ Neighborhood which is currently zoned _____ on the Official Zoning Map of the City of Chamblee.

PROPOSED DISTRICT SUMMARY

Name of the Proposed District

Total # of Properties Involved

Total District Acreage

Which of the zoning provisions standards - as per UDO Section 220-3(j), would be included in the proposed Neighborhood Preservation Overlay District:

- (1) Height _____
- (2) Building materials _____
- (3) Square footage _____
- (4) Setback _____
- (5) Roof forms _____
- (6) Other design features _____

ATTACHMENTS

- Pre-application Form signed and dated by the Development Director.
- Boundary Map of the NPOD.
- Petition for the Creation of a Neighborhood Preservation Overlay District
- Property Information Sheets for each property within the boundaries
- Owner Permission Affidavit

NPOD Application Form, Page 4

I hereby certify that all information provided herein and in the accompanying Application is true and correct.

_____ Date: ____ / ____ / ____
Applicant Signature:

I hereby certify that this application is complete and hence has been accepted and filed as of the following date of certification.

_____ Official Application Submittal Date: ____ / ____ / ____

Signature _ City Manager or _ his/her Designee (print name) _____

The Applicant has been notified that this application is to be heard at the next available **Mayor and City Council hearing** scheduled for:

Date: ____ / ____ / ____ at Time: _____ PM / AM at the following location: _____.