



## Burial Ground/Cemetery Relocation Permit Application

### Instructions:

A properly completed application to include all required supplemental documents and payment of fees are due at the time of submittal. Original signatures are required. Incomplete applications will not be accepted nor further processed.

**Applicant Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Tax Map & Parcel #(s):** \_\_\_\_\_

**Physical Address (if applicable):** \_\_\_\_\_

### Checklist:

- 1. Fee: \_\_\_\_Burial Ground/Cemetery Relocation Permit Application (\$2,500 per application)\*  
(\*1-Public Notice Sign is included with the application fee. Additional signs as required by law will be at the expense of the applicant in the amount of \$25 for each additional sign needed. Failure to pay additional fees for required signs will prevent further processing of the application.)
- 2. Completed Application Form including Signed and Notarized Signatures of Owner/s & Campaign Contribution Disclosure\_\_\_\_\_
- 3. Evidence of ownership of the land on which the cemetery or burial ground is located in the form of a legal description based upon a title search\_\_\_\_\_
- 4. Metes and bounds legal description of the property \_\_\_\_\_
- 5. Copy of current survey plat of the property on record\_\_\_\_\_
- 6. Letter of Intent \_\_\_\_\_
- 7. Report prepared by an archeologist stating the number of graves believed to be present and their locations as can be determined from the use of minimally invasive investigation techniques, including remote sensing methods and the use of metal probes, which activities shall not require a permit\_\_\_\_\_
- 8. Survey prepared by or under the direction of a registered surveyor showing the location and boundaries of the cemetery or burial ground based on an archeologist's report\_\_\_\_\_



9. Sketch plan of the property(-ies) the cemetery or burial ground is located upon at an appropriate engineering scale prepared under the direction of a registered surveyor showing the following information:
1. Name, address, telephone number and email address of the property owner(s), and of the applicant if different from the property owner(s)
  2. If drawn on a boundary survey, the date of survey and source of data
  3. Date of sketch plan drawing, and revision dates, if applicable
  4. North arrow and graphic engineering scale
  5. Location (land district, address, and tax map and parcel number) and size of the property in acres (or in square feet if less than an acre)
  6. Vicinity map, showing the property in relation to the surrounding area with regard to well-known landmarks such as arterial streets or railroads. (per UDC section 12-104)
  7. Zoning district classification of the subject property and all adjacent properties
  8. Man-made features within and adjacent to the property, including existing streets and names, city and city limit lines, and other information such as location of bridges, major utility lines, existing buildings and structures to remain, and other features as appropriate to the nature of the request
  9. Location and boundaries of the cemetery or burial ground based on an archeologist's report and survey as required above
  10. Proposed project layout, including the approximate location of all buildings, and the location of all minimum building setback line, outdoor storage areas, buffers, parking areas, driveways, and approximate location of proposed storm water detention facilities
  11. Proposed use(s) of the property
  12. Statement from the utility provider(s) as to the source of water supply and the provision for sanitary sewage disposal
  13. Statistics regarding the proposed development, such as but not limited to maximum building height, minimum lot size, lot width, building coverage, percentage of landscaped open space, stream and zoning buffers required, and other information demonstrating compliance with the proposed zoning district's dimensional requirements as determined by the zoning administrator
10. Plan prepared by a genealogist for identifying and notifying the descendants of those buried or believed to be buried in such cemetery. If those buried or believed to be buried are of aboriginal or American Indian descent, the genealogist, in preparing the notification plan, shall consult with the Council on American Indian Concerns created pursuant to O.C.G.A. 44-12-280 and shall include in the notification plan not only any known descendants of those presumed buried but also any American Indian Tribes as defined in paragraph (2) of O.C.G.A. 44-12-260 that are culturally affiliated with \_\_\_\_\_
11. A proposal for mitigation or avoidance of the effects of the planned activity on the cemetery or burial ground. If the proposal includes relocation of any human remains or burial objects, the proposal shall specify the method of disinterment, the location and method or disposition of the remains, the approximate cost of the process, and the approximate number or graves affected \_\_\_\_\_
12. A traffic impact study prepared by a professional engineer registered in Georgia where applicable \_\_\_\_\_



## **APPLICATION MATERIALS- DESCRIPTIONS:**

**APPLICATION FORM:** Original and notarized signatures of the property owner(s) and applicant(s) or notarized statement by the applicant as to ownership are required.

**DEFINITIONS:** Terms used in this Division shall have the meanings given to them in O.C.G.A. 36-72-4, unless otherwise defined within the Unified Development Code.

**DISCLOSURE FORM:** If the owner, applicant and/or applicant's representative has made a campaign contribution to the Mayor or any member of the City Council for \$250.00 or more within the past 2 years. If no contributions have been made, *No* should be circled and form signed.

**GENEOLOGIST PLAN FOR NOTIFICATION OF DECENDENTS:** Plan prepared by a genealogist for identifying and notifying the descendants of those buried or believed to be buried in such cemetery. If those buried or believed to be buried are of aboriginal or American Indian descent, the genealogist, in preparing the notification plan, shall consult with the Council on American Indian Concerns created pursuant to O.C.G.A. 44-12-280 and shall include in the notification plan not only any known descendants of those presumed buried but also any American Indian Tribes as defined in paragraph (2) of O.C.G.A. 44-12-260 that are culturally affiliated with.

**METES AND BOUNDS LEGAL DESCRIPTION:** The legal description must be a *metes and bounds* description of the property that establishes a point of beginning and gives directions (bounds) and distances (metes) of property lines. If the property consists of more than one parcel, all parcels must be combined into one legal description.

**RECORDED PLAT:** A copy of the most recent plat on record with the Jackson County Superior Court Clerk for the property, to include the date/time stamp of recording and book and page number where the plat can be located.

**LETTER OF INTENT:** The Letter of Intent should describe the proposed use of the property, include an analysis of how the proposed action compares to decision criteria specified for rezoning decisions (UDC Sec. 12-104), and a description of any special conditions voluntarily made a part of the request.

**SITE PLAN OR SKETCH PLAN:** Site plans or sketch plans should be no larger than 30" x 42" (one should be 8 1/2" x 11") and drawn to scale, plus one digital copy. All items must be included on the Site Plan; separate Site Plans may be necessary to address all items.



**PROPERTY INFORMATION:**

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CURRENT ZONING DISTRICT(S): \_\_\_\_\_

WARD #: \_\_\_\_\_ TOTAL ACREAGE: \_\_\_\_\_

CURRENT ADDRESS OF PROPERTY: \_\_\_\_\_

CURRENT TAX MAP & PARCEL #(S): \_\_\_\_\_

**IF RELOCATING:**

PROPOSED ADDRESS OF PROPERTY: \_\_\_\_\_

PROPOSED TAX MAP & PARCEL #(S): \_\_\_\_\_



**OWNER/APPLICANT/AGENT INFORMATION:**

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**APPLICANT / ATTORNEY / AGENT INFORMATION:**

Check One:  Applicant       Attorney       Agent

Name: \_\_\_\_\_

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

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

Phone Number(s): \_\_\_\_\_

Email Address \_\_\_\_\_

**PROPERTY OWNER INFORMATION:**

\*If more than one property owner, add additional pages as needed for each property owner.\*

Property Owner Name: \_\_\_\_\_

Mailing Address (if different from above): \_\_\_\_\_

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

Phone Number(s): \_\_\_\_\_

Email Address \_\_\_\_\_

Property Owner Name: \_\_\_\_\_

Mailing Address (if different from above): \_\_\_\_\_

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

Phone Number(s): \_\_\_\_\_

Email Address \_\_\_\_\_



**GENEALOGIST/ARCHEOLOGIST INFORMATION:** \_\_\_\_\_

**GENEALOGIST INFORMATION:**

Company Name: \_\_\_\_\_

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

Point of Contact: \_\_\_\_\_

Contact Phone Number: \_\_\_\_\_

Contact Email Address: \_\_\_\_\_

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

Phone Number(s): \_\_\_\_\_

Email Address \_\_\_\_\_

**ARCHEOLOGIST INFORMATION:**

Company Name: \_\_\_\_\_

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

Point of Contact: \_\_\_\_\_

Contact Phone Number: \_\_\_\_\_

Contact Email Address: \_\_\_\_\_

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

Phone Number(s): \_\_\_\_\_

Email Address \_\_\_\_\_



**APPLICANT'S CERTIFICATION:**

THE UNDERSIGNED BELOW STATES UNDER OATH THAT THEY ARE AUTHORIZED TO MAKE THIS APPLICATION. THE UNDERSIGNED IS AWARE THAT NO APPLICATION OR REAPPLICATION AFFECTING THE SAME LAND SHALL BE ACTED UPON WITHIN 12 MONTHS FROM THE DATE OF LAST ACTION BY THE CITY COUNCIL.

\_\_\_\_\_  
Signature of Applicant / Attorney / Agent

\_\_\_\_\_  
Date

\_\_\_\_\_  
Type or Print Name

\_\_\_\_\_  
Notary Seal

\_\_\_\_\_  
Signature of Notary Public

\_\_\_\_\_  
Date



**PROPERTY OWNER'S CERTIFICATION:**

\*Signature page required for each/every owner.\*

I do solemnly swear and attest, subject to criminal penalties for false swearing, that I am the legal owner, as reflected in the records of Jackson County, Georgia, of the property identified below, which is the subject of the attached application before the City of Commerce, Georgia. As the legal owner of record of the subject property, I hereby authorize the individual named below to act as the applicant in the pursuit of the Application for Rezoning, Use Permit, & Concurrent Variance in request of the items indicated below.

I, \_\_\_\_\_, authorize, \_\_\_\_\_,  
(Property Owner) (Applicant)

to file for \_\_\_\_\_, at \_\_\_\_\_,  
(Burial Ground/Cemetery Relocation) (Address)

on this day \_\_\_\_\_ of \_\_\_\_\_, 20\_\_\_\_\_

- I understand that no application or reapplication affecting the same land shall be acted upon within 12 months from the date of last action by the City Council.
- I understand that failure to supply all required information (per the relevant Applicant Checklists and requirements of the City of Commerce Zoning Ordinance) will result in REJECTION OF THE APPLICATION.
- I understand that preliminary approval of my design plan does not authorize final approval of my zoning. I agree to arrange sign permitting separately, after approval is obtained.
- I understand that representation associated with this application on behalf of the property owner, project coordinator, potential property owner, agent or such other representative shall be binding.

\_\_\_\_\_  
Signature of Property Owner

\_\_\_\_\_  
Date

\_\_\_\_\_  
Type or Print Name

\_\_\_\_\_  
Notary Seal

\_\_\_\_\_  
Signature of Notary Public

\_\_\_\_\_  
Date





**CAMPAIGN CONTRIBUTIONS:**

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WITHIN THE (2) YEARS IMMEDIATELY PRECEDING THE FILING OF THIS ZONING PETITION HAVE YOU, AS THE APPLICANT OR OPPONENT FOR THE REZONING PETITION, OR AN ATTORNEY OR AGENT OF THE APPLICANT OR OPPONENT FOR THE REZONING PETITION, MADE ANY CAMPAIGN CONTRIBUTIONS AGGREGATING \$250.00 OR MORE OR MADE GIFTS HAVING AN AGGREGATE VALUE OF \$250.00 TO THE MAYOR OR ANY MEMBER OF THE CITY COUNCIL.

**CIRCLE ONE:    YES            NO**

| Name of Government Official | Total Dollar Amount | Date of Contribution | Enumeration and Description of Gift Valued at \$250.00 or more |
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The undersigned acknowledges that this disclosure is made in accordance with the Official Code of Georgia, Section 36-67A-1 et. seq. Conflict of interest in zoning actions, and that the information set forth herein is true to the undersigned's best knowledge, information and belief.

Name (print) \_\_\_\_\_

Signature: \_\_\_\_\_