



# REQUEST FOR REPLATTING OF NONRESIDENTIAL LOTS

## OFFICE OF ZONING & DEVELOPMENT

### CITY OF ATLANTA, GEORGIA

**REP-**

**NONRESIDENTIAL REPLATS**

ADDRESS (ES) OF PROPERTY \_\_\_\_\_  
*(Indicate addresses and/or parcel ID numbers of all properties involved in proposed replatting)*

**[Replat applications may take up to 30 (thirty) business days for review].**

NAME OF APPLICANT \_\_\_\_\_ PHONE NUMBER: \_\_\_\_\_  
 NAME OF COMPANY \_\_\_\_\_ CELL NUMBER: \_\_\_\_\_  
 STREET ADDRESS \_\_\_\_\_  
 E-MAIL ADDRESS \_\_\_\_\_  
 CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

**IF MORE THAN ONE OWNER, LIST ADDITIONAL OWNERS ON A SEPARATE SHEET**

NAME OF OWNER \_\_\_\_\_  
 STREET ADDRESS \_\_\_\_\_  
 CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

**I HEREBY REQUEST approval of the replatting of the subject property according to the plans, which are submitted as a part of this application. I HEREBY AUTHORIZE the staff of the City of Atlanta to inspect the premises of the above described property. I HEREBY SWEAR AND AFFIRM that all statements contained herein and attached hereto are true and correct to the best of my knowledge and belief.**

**Owner or Agent for Owner (Applicant)** \_\_\_\_\_

#### INSTRUCTIONS:

(Any form that is not completely filled may be delayed, result in a denial or returned to the applicant)

- **Application review fee due at the time of filing the application of \$ 20.00 (per lot) for the first two lots with \$10.00 per lot for any additional lot.**
- Project Description Summary Form
  - Provide information concerning the reasons for this replatting in the space available.
- Authorization of Property Ownership Form
  - If more than one owner, a separate form must be signed, dated & notarized by all owners involved.
- A clear, legible, to-scale boundary survey.
  - The survey should show the proposed replatting with required setbacks and dimensioned lot lines (bearings and lengths) and size of the resultant lot(s) by acreage and square footage.
  - If property lines are being adjusted and more than one lot is being affected, all lots involved need to be reflected on the survey. The resultant property lines should be solid lines. The previous property line(s) needs to be shown as dashed or dotted lines and labeled "Original Property Line" or "Previous Property Line".
  - The survey should reflect all existing conditions on the site, i.e., structures, driveways, retaining walls, parking spaces, fences, etc. Surveys with structures must state the size in square feet and the type of use within the footprint(s) shown. Survey must show that as a result of the requested change in boundaries, all development controls of the zoning classification are met (setbacks, parking, open space, etc.)
  - Survey should reflect the name, size & extents of all bordering rights of way.
  - Square footage of existing buildings and the use within those structures must appear on the survey as well as all calculations needed to satisfy the development controls for the uses within the structures, especially parking and floor area.
  - Provide the distance from the nearest intersection (on the same side of the road) in each direction.
  - Surveyor must sign through seal.
  - Boundary lines should be obtained from actual field-run survey records.
    - One (1) copy of the current, recorded, full warranty deed for all the land proposed for replatting.
- Electronic plat recordation for properties in Fulton County and DeKalb County will begin June 21, 2022. Upon approval of a plat, the City of Atlanta Office of Zoning and Development will electronically file all plats and provide a copy of the recorded plat to the applicant on record. For additional information, please contact the Office of Zoning and Development at (404) 330-6145 or [depozd@atlantaga.gov](mailto:depozd@atlantaga.gov)



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CITY OF ATLANTA, GEORGIA**

**PROJECT SUMMARY FORM**

**REP-**

**NONRESIDENTIAL REPLATS**

**ADDRESS OF PROPERTY** \_\_\_\_\_

*(Indicate addresses or parcel ID numbers of all properties proposed for replatting)*

**Land Lot** \_\_\_\_\_ **Land District** \_\_\_\_\_ **Zoning** \_\_\_\_\_

**Council District** \_\_\_\_\_ **Neighborhood Planning Unit (s)** \_\_\_\_\_

**INDICATE THE PURPOSE OF THE REQUESTED REPLAT, WHAT ISSUE(S) WOULD BE RESOLVED (BE SPECIFIC)**

**Is this replat a requirement for obtaining a building permit?**  Yes  No *(Attach any comments received from the referring Office.)*

**Name of Referring Staff Member in the Office of Buildings** \_\_\_\_\_

**Is this replat request a result of an approved rezoning?**  Yes  No **Case Number** \_\_\_\_\_

**Is this replat request needed to proceed with or a result of an Urban Enterprise Zone Application?**  Yes  No

**INDICATE ADDITIONAL INFORMATION THAT WILL ASSIST WITH THE REVIEW OF THIS APPLICATION.**



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**AFFIDAVIT  
AUTHORIZATION BY PROPERTY OWNER  
APPLICATION FOR LOT REPLATTING  
CITY OF ATLANTA, GEORGIA**

I swear that I am the owner of \_\_\_\_\_  
*(Indicate addresses or parcel ID numbers of all properties proposed for replatting)*

\_\_\_\_\_ which is the subject of the attached  
application for land replatting, and is shown in the records of \_\_\_\_\_ County, Georgia.

I authorize the person named below to act as my agent in the pursuit of this application for the replatting of the  
subject property.

**NAME OF APPLICANT (AGENT)** \_\_\_\_\_

**ADDRESS OF APPLICANT** \_\_\_\_\_

**APPLICANT'S TELEPHONE #** \_\_\_\_\_

**APPLICANT'S EMAIL ADDRESS** \_\_\_\_\_

**NAME OF OWNER** \_\_\_\_\_

**SIGNATURE OF OWNER** \_\_\_\_\_

**NOTARIAL STATEMENT FOR PROPERTY OWNER**

Sworn to and subscribed before me this \_\_\_\_\_ day of

\_\_\_\_\_, 20\_\_\_\_

\_\_\_\_\_  
Notary Public