



NEWTON COUNTY

APPLICATION PACKAGE

FOR

ADMINISTRATIVE USE

PERMIT

(Revised 2026)

DEADLINES AND PROCEDURES

1. Pre-application review is required prior to the submittal of the application.
2. The application must be complete and submitted by the deadline of the first Friday of each month before 3:30 P.M to go to the next available month's meeting. Fees are to be paid at the time of filing.
3. Applications must be submitted in-person, via courier or mail by the applicant or an authorized agent. Applications must also be submitted via email to pnz@co.newton.ga.us.
4. Applicant is requested to submit any revisions to site plans, letters of intent, proposed conditions, etc. to the Development Services Department. Last minute revisions may delay the dates of your public hearings.
5. The applicant may be given a Public Notice sign to post on the property.
6. The applicant must attend one public hearing. The hearing is as follows:

 Planning Commission meeting
 Held the fourth Tuesday of each month.
 Time: 7:00 p.m.
 Location: The 3rd floor of the Historic Courthouse, 1124 Clark Street, Covington, GA 30014.
7. The staff analysis reports will be available in the Department one week before the meeting. Applicants are responsible for obtaining their staff reports.
8. The agenda for each meeting and a summary of the meeting is available on our website at www.co.newton.ga.us
9. Fees must be paid by card (3.5% convenience fee), check or money order. Checks without pre-printed account information will not be accepted. Please view the fee schedule on <https://www.newtoncountyga.gov/196/Development-Services> and/or contact Development Services to determine the applicable fees.

NEWTON COUNTY
APPLICANT'S CHECK SHEET

**DOCUMENTS AND QUANTITIES REQUIRED FOR
ADMINISTRATIVE USE PERMITS**

FILING DEADLINE: FIRST FRIDAY OF EACH MONTH, BEFORE 3:30 p.m.

FEES MAY BE PAID BY CHECK OR MONEY ORDER ONLY

ITEM	REQUIRED ITEM	NUMBER OF COPIES	CHECK ☒
1.	Pre-application Review Form	One (1) copy	
2.	Application Form	One (1) original	
3.	Letter of Intent	One (1)	
4.	Survey Plat	One (1)	
5.	Written Legal Description	One (1)	
6.	Concept Plan – Full size	Two (2)	
7.	Impact Analysis	One (1)	
8.	Email application, all documents & plans in a PDF to PNZ@co.newton.ga.us		

REQUIRED ITEMS FOR ADMINISTRATIVE USE PERMITS:

ITEM 1. **PREAPPLICATION REVIEW MEETING AND FORM:** Prior to submitting an application, all applicants must meet with the Zoning Administrator or the Planner who will review your proposal and issue a Pre-Application Review Form. Must email a concept plan in order to schedule the meeting. Call 678-625-1650 or email PNZ@co.newton.ga.us for an appointment.

ITEM 2. **APPLICATION FORM:** The applicant must have a notarized signature of all owners of the subject property authorizing the filing of the application. If the owner is not the petitioner, part 2 of the form must also be completed. The owner's signature of the application may serve as authorization for the petitioner/applicant or agent to act on their behalf in the filing of the application.

ITEM 3. **LETTER OF INTENT:** The letter should include factual information such as zoning district, petition number, date of hearing, condition number, and details of the requested modification. (i.e. "to delete the condition ...", or "to reduce the approved buffer from 100 feet to 50 feet...")

- ITEM 4. SURVEY PLAT: The survey of the property must be prepared and sealed by a professional engineer or land surveyor registered in the State of Georgia, and include the following
1. The complete boundaries of the subject property and all buildings and structures existing thereon;
 2. Notation as to whether or not any portion of the subject property is with the boundaries of the 100-year floodplain; and
 3. A notation as to the total acreage or square footage of the subject property.
- ITEM 5. WRITTEN LEGAL DISCRIPTION: Must be a “metes and bounds” description. Must match the survey and the concept plan. If property is within a recorded subdivision, lot number(s) and book and page of recorded plat may be sufficient, if a copy of the recorded plat is provided.
- ITEM 6. CONCEPT PLAN – FULL SIZE Must be drawn to scale. Include existing and proposed conditions, and anything useful to demonstrate a hardship like shape of property, easements, topography, parking, driveways, buffers, landscape areas, streams, and other features.
- ITEM 7. IMPACT ANALYSIS: Complete the form answering all questions regarding the impact of the proposed use with respect to each standard and factor in Sec. 505-015 (B.).
- ITEM 8. EMAIL PDF Must Email application, all documents & plans in a PDF to PNZ@co.newton.ga.us.

PETITION FOR ADMINISTRATIVE USE PERMIT

Date:_____ Tax Map and Parcel Number(s):_____

Commission District Number:_____

SECTION I USE REQUEST

SUBJECT PROPERTY ADDRESS/STREET NAME: _____

Under provisions of Section 505 of the Newton County Zoning Ordinance, application is hereby made to obtain an Administrative Use Permit as follows:

CURRENT ZONING:

ADMINISTRATIVE USE PERMIT REQUEST:

SECTION II

OWNER/PETITIONER

NOTICE: Parts 1 and/or Part 2 below must be signed and notarized when petition is submitted. Please complete Section II as follows:

- a) If you are the sole owner of the property and not the petitioner complete Part 1.
 - b) If you are the petitioner and not the sole owner of the property complete Part 2 and have owner/s complete Part 1.
 - c) If you are the sole owner and petitioner complete Part 1 and 2.
 - d) If there are multiple owners each must complete a separate Part 1 and include it in the application. Please indicate applicable map and parcel numbers for each owner.
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Part 1.

Owner states under oath that he/she is the owner of the property described in the attached legal description, which is made part of this application. The owner also states under oath that the petitioner below is authorized to act on their behalf in the filing of this application.

TYPE OR PRINT OWNER'S NAME

Sworn to and subscribed before me this

TYPE OR PRINT COMPANY'S NAME

_____ Day of _____ 20____

ADDRESS

NOTARY PUBLIC

CITY & STATE ZIP CODE

OWNER'S SIGNATURE

OWNER'S PHONE NUMBER

OWNER'S EMAIL ADDRESS

Part 2.

Sworn to and subscribed before me this

TYPE OR PRINT PETITIONER'S NAME

_____ Day of _____ 20____

TYPE OR PRINT COMPANY'S NAME

ADDRESS

NOTARY PUBLIC

CITY & STATE ZIP CODE

PETITIONER'S SIGNATURE

PETITIONER'S PHONE NUMBER

PETITIONER'S EMAIL ADDRESS

SECTION III**ATTORNEY/AGENT**

Check One: ☐ Attorney ☐ Agent

TYPE OR PRINT ATTORNEY / AGENT NAME

ADDRESS

EMAIL ADDRESS

CITY & STATE

PHONE NUMBER

ZIP CODE

SIGNATURE OF ATTORNEY / AGENT

MARKER SIGN

I understand that upon filing this petition I may be given a marker sign (or signs) to place upon the property associated with this request. The purpose of these marker signs is to confirm the physical location of the property so that the Road Department may place the public notification signs required by Section 620-020 B. of the Newton County Zoning Ordinance and State law. One marker sign shall be placed along each public road the property abuts.

I also understand that, if required, it is my responsibility to have the marker sign(s) placed **within one week** of the filing deadline so that the Development Services Department may visit the property to confirm the proper location of the signs.

I further understand that if these marker signs are not properly located the Road Department will be unable to place the required notification signs. In the event the signs are not able to be posted within the time frame specified by the Zoning Ordinance and State law due to my failure to properly place the marker signs, my petition may be delayed to a subsequent hearing date.

I hereby certify that the necessary marker sign(s) will be placed on the property by _____, 20_____.

Applicant's Signature: _____ **Date:** _____

LETTER OF ACCESS

I agree to allow free access to the land this application is being submitted for to all public agencies with jurisdiction. Furthermore, I agree to inform those agencies and/or departments who require access to this land of any hazardous materials, animals, devices or activities that may be on the property. In addition, from the date of application submittal, I agree to notify the Department of Development Services of any hunting activities that are currently, or proposed to be, conducted on my property.

The Newton County Development Services Department will do our utmost to contact the owner of the property twenty-four (24) hours prior to any site inspections or visits to the property. If staff is unable to contact the property owner via a phone call, email and/or voice message, staff will contact the applicant, if applicable.

Property Owner's Signature: _____ **Date:** _____

Applicant's Signature: _____ **Date:** _____

IMPACT ANALYSIS FOR ADMINISTRATIVE USE PERMIT APPLICATIONS

Complete the following questions 1 through 5 (as applicable):

1. Petitioner's Name: _____

2. Road Name(s): _____

3. Map and Parcel #: _____

4. Administrative Use Request: _____

Analyze the impact of the proposed use and answer the following questions:

1. The proposed use is consistent with the character of the zoning district.

2. The impact of the proposed use on the surrounding properties and uses, including aesthetics, traffic, health, public services, and safety

3. The site is adequately sized and contains appropriate terrain and geography for the use.

4. The use should not create unreasonable adverse impacts upon any adjoining land use by reason of noise, smoke, odor, hours of operation, light pollution or other considerations.

5. As applicable, the buffers, screening and mitigation measures can ameliorate any negative impact
