



**TOWN OF THUNDERBOLT
PLANNING & ZONING APPLICATION
RESIDENTIAL OR COMMERCIAL**

Date Filed _____ Application # _____ Residential: _____ Commercial:

Application Fees: \$100.00 – Residential \$200.00 – Commercial
Fee must be paid at the time of submitting the application and is non-refundable, even if Applicant decides to redraw their application before or after the application process.

The original plus nine copies of this application shall be submitted. The building permit application and nine copies of the plot plan and development plans of the site, if required for the building permit application, shall accompany this application.

DESCRIPTION OF PROPERTY

Applicant's Name: Kirk Watson Phone # 912-222-5480

Applicant's Address: _____

2389 & 2398 Downing Avenue Thunderbolt GA 31404 30002 02025 30002 02024
Property Address Parcel Number

Owner's Name & Address Victory Drive Storage Company & Sibling LLC
PO Box 30320, Sea Island GA 31561

Zoning District B Current Use of Property Storage Facility

Proposed Use of Property truncating existing buildings to make space for a temperature controlled storage building to front of property

REASONS FOR APPLICATION

1. A decision of the Zoning Administrator which the applicant believes to be contrary to the meaning of the Zoning Ordinance.
2. An application to establish a use which must be approved by the Planning Board (See "Use Schedule – List of Uses #).
3. A request for a variance a yard requirement; a lot width requirement; a lot area requirement. Note: Variances are heard and approved on a case by case basis; when resulting in practical difficulty or unnecessary hardship. Code of Ordinances 16.6c
4. A request for extension of non-conforming use.
5. Rezoning request from _____ classification to a _____ classification
6. Other Approval of a modern and updated, forward-facing facade
Describe those things which you feel justify the action requested. List when necessary the specific Sections of the Zoning Ordinance which have a bearing on your request.
(Use back of this sheet if necessary.)

Project is located in the Victory Drive District

OTHER INFORMATION REQUIRED

Refer to Article XV, Zoning Ordinance

Attach, hereto, a scaled or dimensioned map, plat, or sketch of tract, of property in question and all other adjoining lots or properties under the same ownership. Said map, plat, or sketch shall indicate the approximate location of all the properties in question with respect to the nearby public roads in common use.

Date Received: _____ Zoning Administrator: _____

Name and Address of Contractor(s) _____

The following is a list of the names and addresses of all adjacent property owners within approximately a two-hundred (200) foot radius of the property:

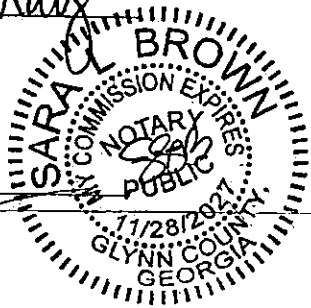
(Please list additional names on a separate sheet)

I hereby certify that the above stated facts are True to the best of my knowledge and belief And that I am the owner or authorized agent for the owner of the subject property.

Owner or Authorized Agent's Signature

Sworn to and subscribed before me on this 13 day of May 2011.

Notary Public



Fee received and paid: _____

STATUS

Notice of hearing sent: _____
Date

Sign Posted: _____
Date Address

Published Advertisement: _____
Date