

Special Administrative Permit

Community Development

4800 Ashford Dunwoody Road | Dunwoody, GA 30338

Phone: (678) 382-6800 | Fax: (770) 396-4828

The City of Dunwoody Community Development Department accepts requests for special administrative permits. Special administrative permits may be approved by the Community Development Director only when the determination has been made that any specific approval criteria associated with the authorized special administrative permit and the following general approval criteria have been met:

- The grant of the administrative permit will not be detrimental to the public health, safety or welfare of the public or injurious to the property or improvements;
- The requested administrative permit does not go beyond the minimum necessary to afford relief, and does not constitute a grant of special privilege inconsistent with the limitations upon other similarly situated properties; and
- The requested administrative permit is consistent with all relevant purpose and in-tent statements of this zoning ordinance.

The community development director is authorized to approve special administrative permits for wing walls and retaining walls only when the general approval criteria above, and the following specific approval criteria have been met:

- It is determined that exceptional topographical restrictions exist on the lot in context with the adjoining property that were not created by the applicant or owner, and a determination that no practical alternative retaining wall design is feasible. The applicant must submit a site plan or a topographical map certified by an engineer or landscape architect with any exception application for retaining walls.

The community development director is authorized to approve special administrative permits for proposed front door threshold elevation for new detached houses that exceed the threshold elevation allowed only when the general approval criteria above, and the following specific approval criteria have been met:

- The applicant for a building permit establishes that the elevation of the front door threshold of the proposed residential structure does not exceed the average elevation of the front door thresholds of the residential structures on both lots immediately abutting the subject lot. If any adjacent lot is vacant, the front door threshold shall be calculated using the formula in Sec. 27-147(1)a. The applicant must provide the community development director with the threshold elevations, as certified by a licensed surveyor or engineer.

Submit a site plan, project details and photos, and a project narrative that addresses how your project meets the applicable special administrative permit criteria listed above.

Please submit an electronic version of the entirety of your application submittal, saved as a single PDF.

A sign must be placed in a conspicuous location on the subject property at least 30 days before the date of the community development director's decision on the special administrative permit request. This required notice must indicate the earliest date that a decision on the special administrative permit will be made and indicate the nature of the request and a contact where additional information can be obtained.

SPECIAL ADMINISTRATIVE PERMIT APPLICATION

Community Development
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 Phone: (678) 382-6800 | Fax: (770) 396-4828

Project #: _____ Date Received: _____

*** Type:**

Type of Request: Chapter 16-Streams Chapter 27-Zoning
 Code section from which special administrative permit is sought: _____
 Nature of Request: _____

*** Project:**

Name of Project / Subdivision: _____ Zoning: _____
 Property Address / Location: _____
 District: _____ Land Lot: _____ Block: _____ Property ID: _____

*** Owner Information:**

Owner's Name: _____
 Owner's Address: _____
 Phone: _____ Fax: _____ Email: _____

*** Applicant Information:** Check here if same as Property Owner

Contact Name: _____
 Address: _____
 Phone: _____ Fax: _____ Email: _____

*** Terms & Conditions:**

I hereby certify that to the best of my knowledge, this application form is correct and complete. If additional materials are determined to be necessary, I understand that I am responsible for filing additional materials as specified by the City of Dunwoody Zoning Ordinance. I understand that failure to supply all required information (per the relevant requirements of the Dunwoody Zoning Ordinance) will result in the rejection of this application.

Applicant's Name: _____
 Applicant's Signature: _____ Date: _____

*** Notary:**

Sworn to and subscribed before me this _____ Day of _____, 20____
 Notary Public: _____
 Signature: _____
 My Commission Expires: _____

*** Office Use:**

Application Fee: \$250 for Single-Family \$350 for Commercial/Other
 Payment: Cash Check CC Date: _____
 Decision: _____ Date: _____

Property Owner(s) Notarized Certification

The owner and petitioner acknowledge that this application form is correct and complete. By completing this form, all owners of the subject property certify authorization of the filing of the application, and authorization of an applicant or agent to act on their behalf in the filing of the application including all subsequent application amendments.

*** Property Owner (If Applicable):**

Owner Name: _____
Signature: _____ Date: _____
Address: _____
Phone: _____ Fax: _____ Email: _____
Sworn to and subscribed before me this _____ Day of _____, 20____
Notary Public:

*** Property Owner (If Applicable):**

Owner Name: _____
Signature: _____ Date: _____
Address: _____
Phone: _____ Fax: _____ Email: _____
Sworn to and subscribed before me this _____ Day of _____, 20____
Notary Public:

*** Property Owner (If Applicable):**

Owner Name: _____
Signature: _____ Date: _____
Address: _____
Phone: _____ Fax: _____ Email: _____
Sworn to and subscribed before me this _____ Day of _____, 20____
Notary Public: