

**APPLICATION FOR
ADULT ENTERTAINMENT ESTABLISHMENT**

This space for office use only.

PANEL NUMBER _____ DISTRICT _____

QUAD _____ PARCEL _____

GA PIN NUMBER _____

PERMITTED USE _____ CONDITIONAL USE _____ SPECIAL EXCEPTION _____

PROPOSED USE _____

CATEGORY _____

LDA _____ OTHER PERMITS _____

SETBACKS _____ VARIANCES _____

RECEIPT NUMBER _____ AMOUNT _____ DATE _____

FEE CATEGORY _____

APPROVED BY _____ DATE _____

CONDITIONS OF APPROVAL _____

DATE **COMPLETE** APPLICATION RECEIVED _____

DATE APPLICATION APPROVED BY STAFF _____

DATE APPLICATION APPROVED BY COMMISSION _____

PLEASE PRINT

- DATE _____
1. Address of Proposed Use: _____
 2. Applicant Name _____
 3. Applicant Mailing Address _____

 4. E-mail address for **primary contact** (required) _____
Note: When possible, any correspondence for an agenda item will be by email.
 5. Applicant Daytime Phone _____ - _____ - _____
 6. Is the property located **within** Macon City Limits? Yes _____ No _____
 7. Property Owner's or Manager's Name _____
 8. Is this application for use in an existing structure? Yes _____ No _____
 9. How many square feet does the building have? _____

First Floor _____ Second Floor _____

10. How many off-street parking spaces will be provided? _____

11. Does this use include: _____ Retail Sales _____ Food Service*

* **Note:** all establishments that serve food must supply approvals from the Water Authority and the Health Department.

12. How many seats will be provided? _____

13. Does this application include any **New Construction** on this property? Yes ____ No ____

If yes, provide a drawing that shows the following information:

- (A) The shape of the entire lot(s), including the location of street adjacent to the property.
- (B) The location of all buildings, existing and proposed, including the setbacks of each building from the property lines.
- (C) The location of any streams, creeks, or easements.
- (D) The location of all parking.
- (E) Landscape plan.

14. Does your application include a field survey prepared by a surveyor licensed in the State of Georgia that certifies to the following distance requirements:

*** All distances are radial distances measured from property line to property line.**

- At least 1000 feet from any church or other place of worship; public or private park or recreation area; school, day care center, kindergarten, or playschool; public or private library; or orphanage.
- At least 750 feet from any dwelling unit; college or university; any bar, tavern saloon, nightclub, or any place where alcohol is sold for consumption on premises, including restaurants; liquor store, package store, or any other establishment where alcohol packaged to go is the primary source of revenue; hospitals or other medical care facilities, including doctor's offices; grocery stores.
- At least 750 feet from another adult entertainment establishment in a C-4, M-2, M-3, or PDI districts.
- At least 500 feet from any historic district, locally zoned or included on the National Register of Historic Places; any CBD-1 or CBD-2 district.
- At least 250 feet from another adult entertainment establishment in an SC district.

15. Will any signage be added or changed on this property? Yes _____ No _____

*Note: this application applies to the construction on and use of a property for an adult entertainment establishment only. If signage is required, please alert staff and they will assist with a separate signage application. Signage is NOT permitted under THIS application.

Please read the following before signing.

All statements on this application are true to the best of my knowledge and belief. I realize that distances should be exact and if errors result in a violation of zoning regulations, then the structure will have to be removed. I am aware that restrictive covenants may exist on this property which could affect this proposal and that it is my responsibility to make sure those restrictive covenants are not violated.

Applicant hereby grants permission for Planning and Zoning Personnel to enter upon and inspect the property for all purposes allowed and required by the Comprehensive Land Development Resolution for the City of Macon and Bibb County, Georgia.

I hereby attest that I am the owner of the referenced property or have permission from the owner to make this application.

Signature _____

Date _____

Macon-Bibb County Planning and Zoning Commission
682 Cherry Street, Suite 1000, Macon, Georgia 31201
Phone (478) 751-7450

www.maconbibbcountyga.gov

Checks should be payable to Macon-Bibb County Planning & Zoning Form 2/16/2009