

### Carroll County **Department of Community Development**

423 College Street; P.O. Box 338, Carrollton, GA 30117 50 770.830.5861

#### Application for a Family Burial Plot

Applications can be made by either an **applicant** or by a **state licensed funeral director**. The application should be filed within 48 hours of the internment.

#### **Procedures**

- Step 1: Take the Parcel Information Sheet to the Map Room (#414 in the Administration Bldg) to be completed.
- **Step 2:** Complete the application and submit it, along with the Parcel Information Sheet and appropriate fees, to Community Development for review. A sketch on the back of the Parcel Information Sheet should show the location of the family burial plot, buildings, property lines, any water source, proposed setbacks, and a North Arrow.
- **Step 3:** The applicant/funeral director will be notified of the application's approval.
- **Step 4:** The property owner may choose to present the survey, map and zoning compliance to the Tax Assessor's office to have the family burial plot exempt in the tax digest.

1. Applicant's Name:		Size Requirements Parcel Size (Minimum lot: 10 acres)		
Address, City, State & Zip Code:		Size of Family Burial Plot		
Phone:		Width Height (Maximum size: 1600 square feet, 40 feet wide, 40 feet long)		
2. Property Owner (if different from Applicant)		Setback Requirements  Front: Rear: Left Side: Right Side: Building or Structure: Water Source:  (Minimum setback: 50 feet from each property line) (At least 100 feet from a building or water source)		
Phone:				
3. Proposed Burial Location/Address:				
Notarized Signatures of the applicant and at least 51% of all record titleholders are required. Please submit an appropriate number of copies of the attached affidavit. Additional copies will be provided upon request.	Tax Map No Parcel No  Land Lot No District No  Zoning (Must be Agriculture)	Other Requirements  The owner/applicant agrees to place persons interred in a vault. □ Yes □ No  The owner/applicant agrees that perpetual access to the burial plot will be made available to other family members and the County. □ Yes □ No		
	ots are not permitted in flood plains. Further, within the family burial plot is prohibited.	The owner/applicant agrees to preserve and protect the cemetery by placing fencing, signs, etc., if necessary, and further to maintain and upkeep the site.   Yes No		

#### STATE OF GEORGIA COUNTY OF CARROLL



AFFIDAVIT 1	FOR A
authorized to administer oaths in the Sta following statements for the	personally appeared before me, the undersigned officer, duly ate of Georgia and, having been duly sworn, sets forth the purpose of being granted approval for a under the Ordinances of Carroll County:
Community Development consists of fact	the application attached hereto and filed in the Department of ts within my personal knowledge that I know are true and its of Carroll County in making a decision whether to issue this partment approval.
or other organization or entity that is re	are that the Applicant, regardless if a partnership, corporation, eceiving a benefit under this Application, License, Permit, or applicable) is not delinquent in the payment of any taxes or
FURTHER AFFIANT SAYETH	
This day of,	rearing that the above is true and correct.
	AFFIANT (signature)
	Address:
worn to and subscribed efore me this day	
f	If Affiant is authorized to sign on behalf of a partnership, corporation, or other organization or entity, please set forth the entity and address
Notary Public  Iy Commission Expires:	Entity: Address:

# PARCEL INFORMATION SHEET & APPLICATION FOR ZONING COMPLIANCE CERTIFICATE

To be completed by Map Room Personnel in Room #414

MAP ROOM OFFIC	AL:					
MAP:		LA	LAND LOT:			
PARCEL:		DIS	DISTRICT:			
CURRENT PROPER	TY OWNER:					
PROPERTY OWNER	R AS OF JANUAR	AY 1 <sup>ST</sup> :				
APPLICANT (IF DIF	FERENT FROM OV	WNER):				
PROJECT ADDRESS	S:					
CITY:						
SUBDIVISION:		LO	Γ#:			
ACREAGE:		PAI	PARCEL SPLIT FROM:			
CURRENT ZONING	CLASSIFICATIO	)N			_	
CORRENT ZONING	CLASSIFICATIO	711	FRONT			
REQUIRED SETBACKS			SIDE		_	
REQUIRED SETBAC	JK3		REAR			
CERTIFICATE OF ZONING COMPLIANCE – CHECKLIST				  ECKLIST		
☐ Complete Inventory ☐ Complete Inventory	r Adequate Description of Existing Structure of Proposed Structure of Existing Uses and	es (noting uses & non-co	onforming struct	ures)		
Signature of Zoning Add	ministrator or Desig	nee:		Date:		
Comments:						
CDP COMPLIANCE	☐ YES ☐ NO	Signature of CDP Ad	lministrator or	Designee:		
				Date:		
		Comments:				
PLAT APPROVED	☐ YES ☐ NO	Signature of County Engineer or Designee:				
					<del> </del>	
APPROVED FOR	☐ YES ☐ NO	Comments:				
NEW ADDRESS		Signature of Zoning Administrator or Designee:  Date:				
		Comments:		Datt		

## **Sketch of Property**

Please check:		MMERCIAL			
<ul> <li>⇒ Provide a sketch of proposed building location, driveway, septic tank location and all additional structures.</li> <li>⇒ Show the <i>dimensions</i> of the lot and all setbacks from the house and other structures to all property lines.</li> <li>⇒ The front setback shall always be measured from the centerline of the frontage road(s).</li> <li>⇒ Show location of any wells, trash pits and all easements (drainage or utility) located on the property.</li> <li>⇒ Show distance to nearest stream or lake on property, or if not within 200 feet of a stream or lake, please note.</li> </ul>					
Describe the type of structure that you plan to build:  Is this a Multiple Road Frontage Lot:					