

FOR OFFICE USE ONLY
PERMIT #: _____

PLANNING & COMMUNITY DEVELOPMENT

eastpointcity.org

2757 East Point Street, East Point, GA 30344
 Phone: (404) 270-7029 Fax: (404) 209-5148

Kimberly Smith, Director

**ADMINISTRATIVE PERMIT CHECKLIST
 FOR DUPLEX/TRIPLEX USE WITHIN R-1A (URBAN RESIDENTIAL)**

Item #	Required Document	Check <input checked="" type="checkbox"/>
1.	Application Form	
2.	Proof of Structure's Build Date	
3.	Photos of existing meters (electric and water) and heat/air conditioning systems.	
4.	Deed/Legal Description	
5.	Architectural Floorplan Drawing	
6.	Authorization to Inspect Premise	
7.	Fees (non-refundable) \$145 = (\$100 permit + \$45 administrative)	

DEFINITIONS (SECTION 10-2003)

Duplex: **Two side by side dwelling units** sharing a common wall located on the same lot. Used interchangeably with the term "two-family dwelling".

Triplex: **Three side by side dwelling units** sharing a common wall located on the same lot. Used interchangeably with the term "three-family dwelling".

DUPLEXES AND TRIPLEXES (SECTION 10-2094.1)

THE APPLICANT MUST MEET ALL OF THE FOLLOWING STANDARDS:

- Duplex and Triplex structures legally existing in a residential district prior to October 15, 2007 on legally platted lots and now located within an R-1A District shall be permitted in R-1A Districts by administrative permit only.
- Duplexes and triplexes constructed after October 15, 2007, will not be permitted in R-1A Districts.
- Each dwelling unit must have separate electrical meters, water meters and heating and air conditioning systems. In no case shall such systems penetrate common walls.
- The design of the residential structure must clearly have been intended and adequate for a two or three family dwelling without major modification.
- Each dwelling unit must be assigned a different street address.
- Each dwelling unit must meet parking requirements of Section 10-2512, i.e. 2 spaces per dwelling unit.
- If structures or lots for which an administrative permit is sought do not comply with development standards within an R-1A district and an administrative permit is granted, the structures or lots will be considered legally non-conforming and need not obtain variances from development standards to come into compliance with current standards. Minor improvements and repairs to permitted structures are allowed. However, neither the footprint nor the overall square footage of the permitted structure can be expanded unless it can otherwise meet all requirements of the Zoning Ordinance.
- The provisions of Section 10-2015(d)(1) and (2) shall apply to any such permitted duplex or triplex in the R-1A district. However, destruction by any means of more than sixty percent of the gross square footage of any structure permitted under this section shall result in automatic termination and voiding of the administrative permit for the structure. A new duplex or triplex structure may not be rebuilt pursuant to the administrative permit when such destruction has occurred.



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**ADMINISTRATIVE PERMIT APPLICATION FORM
FOR DUPLEX OR TRIPLEX USE WITHIN R-1A DISTRICT**

Structure Type: DUPLEX TRIPLEX

PROJECT LOCATION

Address: _____

Parcel I.D.: _____

Current Zoning: _____

SITE DETAILS

Number of Existing: Dwelling Units: _____ Electric Meters: _____ Water Meters: _____ Heat/Air Conditioning Systems: _____

Has the structure undergone any major modifications and/or reconstruction? Yes No

Was the structure legally existing prior to October 15, 2007? Yes No

Do any of the utility lines penetrate common walls? Yes No

How many parking spaces per unit?

Address/Unit #: _____ Number of Off-Street Parking Spaces: _____

Address/Unit #: _____ Number of Off-Street Parking Spaces: _____

Address/Unit #: _____ Number of Off-Street Parking Spaces: _____

APPLICANT

Name: _____ Phone: _____

Address: _____ E-mail: _____

City/State/Zip: _____ Fax: _____

PROPERTY OWNER Same as applicant

Name: _____ Phone: _____

Address: _____ E-mail: _____

City/State/Zip: _____ Fax: _____

REPRESENTATIVE (AGENT/ATTORNEY)

Name: _____ Phone: _____

Address: _____ E-mail: _____

City/State/Zip: _____ Fax: _____

ADMINISTRATIVE PERMIT (DUPLEX/TRIPLEX) REQUIREMENTS

1. Show proof that the structure was legally existing prior to October 15, 2007 by submitting one of the following documents:

As Built Survey

Recorded Plat

Other*, please specify: _____

*Must be satisfactory to the Director of Planning and Community Development

2. Provide pictures of existing meters and heat/air conditioning systems:

a. Electric Meters

b. Water Meters

c. Heating/Air Conditioning Systems

APPLICANT ACKNOWLEDGEMENT AND SIGNATURE

To the best of my knowledge, this administrative permit application form is accurate and complete. As the applicant and/or property owner, I acknowledge the limits to the permit standards of subsection seven (7) and eight (8) which outline rules on expanding the structure's footprint and/or square footage as well as guidelines on rebuilding the structure in the event that sixty-percent (60%) is destroyed by any means.

PRINT NAME

SIGNATURE

DATE

REQUIRED SIGNATURE(S) AND NOTARIZATION(S)

NOTICE: Part 1 and/or Part 2 below must be signed and notarized when the petition is submitted. Please complete Section IV 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.
- c. If you are the sole owner and petitioner complete Part 1.
- d. If there are multiple owners **each** must complete a separate Part 1 and include it in the application.

Part 1 Owner state under oath that he/she is the owner of the property described in the attached legal description, which is made part of this application.

_____ PRINT OWNER'S NAME	Sworn to and subscribed before me this the _____ Day of _____ 20____
_____ ADDRESS	_____ NOTARY PUBLIC
_____ CITY STATE ZIP CODE	_____ COMMISSION EXPIRES
_____ OWNER'S SIGNATURE	_____ (SEAL)

Part 2 Petitioner states under oath that: (1) he/she is the executor or Attorney-in-fact under a Power-of-Attorney for the owner (attach a copy of the Power-of-Attorney letter and type name above as "Owner"); (2) he/she has an option to purchase said property (attach a copy of the contract and type name of owner above as "Owner"); or (3) he/she has an estate for years which permits the petitioner to apply (attach a copy of lease and type name of owner above as "Owner").

_____ PRINT OWNER'S NAME	Sworn to and subscribed before me this the _____ Day of _____ 20____
_____ ADDRESS	_____ NOTARY PUBLIC
_____ CITY STATE ZIP CODE	_____ COMMISSION EXPIRES
_____ OWNER'S SIGNATURE	_____ (SEAL)

ATTORNEY OR AUTHORIZED AGENT

 PRINT NAME

 ADDRESS

 CITY STATE ZIP CODE

 SIGNATURE



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AUTHORIZATION TO INSPECT PREMISES

I/we (OWNER PRINT NAME) _____,
 am/are the owner(s) of the property, which is the subject matter of this application. I/we authorize the City of East Point to inspect the premises, which are the subject of this request for rezoning/use permit/variance/subdivision.

 OWNER SIGNATURE

APPLICANT SIGNATURE

I have read this entire application and all of the information is completed.
 Personally, appeared before me,

 APPLICANT (OR AGENT) PRINT NAME

 APPLICANT (OR AGENT) SIGNATURE

NOTARIZATION

 NOTARY PUBLIC

 DATE

(SEAL)

 COMMISSION EXPIRES