

FOR OFFICE USE ONLY:

DATE RECEIVED: _____

APPROVED: _____

DISAPPROVED: _____

**APPLICATION FOR FAMILY EXCEPTION IN THE GA ZONE
DISTRICT**

Application is hereby made for a Family Exception to the three (3) acre minimum lot size in the GA, General Agriculture zone district, and if granted, the applicant agrees to conform to all laws, ordinances and resolutions regulating same.

Name of Original

Owner: _____ **Telephone:** _____

Mailing Address:

Address of Property for which Family Exception is requested:

Name of Family Member:

Relation to Original Owner:

(Must be either father, mother, sister, brother, child, or grandchild)

Size of Property to be Conveyed: _____ **acres;**

_____ **square feet**

Include on separate sheet(s) :

- (1) Certified copies of appropriate birth certificates, etc. necessary to reflect the relationship of the parties to the deed;**

I hereby certify that the above information is true and correct.

Signed: _____ **Date:** _____

Original Property Owner

Signed: _____ **Date:** _____
Family Member