

Application Checklist

Applicant illolliation					
Name MI Melle Al Colo	Phone 404.861.3311				
Name MIMILA COLO Wailing Address Suwance, BA 30024 Annlication Checklist	Email MI chelle. allin 1 pool 11 c Ogmail. evon				
Application Checklist					
The following information will be required:					
1. Application					
2. Notice of Intent					
3. Applicant's Written Analysis	Applicant's Written Analysis				
4. ☐ Campaign Contribution Disclosure N/A	□ Campaign Contribution Disclosure N/A				
5. Owner's Authorization, if applicable.					
6. Legal Description and Survey Plat of the property					
7. Application Fee (summary of fees attached)	Application Fee (summary of fees attached)				
8. Copy of the Deed that reflects the current owners	Copy of the Deed that reflects the current owners name				
9. Vicinity Map outlining the parcel/s in relation to the parcel of th	Vicinity Map outlining the parcel/s in relation to the surrounding area				
10. Site plan, plat or survey prepared by an architect,	Site plan, plat or survey prepared by an architect, engineer. The following information must be included:				
tract(s). Locations, sizes and setbacks of proposed height, for residential number of units, Square for easements. Location of dumpsters. Public or priva	e, bearing and distances, other dimensions, and location of the lastructures, including the number of stories and total floor area, otage of heated floor area. Detention/retention areas, and utility ate street(s) - right of way and roadway widths, approximate grades angress and egress. Specific types and dimensions of protective s, stream buffers, and 100 year floodplain.				
11. Sketch Plan/ Architectural Rendering, if applicable	2				
12. Traffic Study required for development with 500,0	Traffic Study required for development with 500,000 sf of nonresidential floor area or 350 dwelling units or more.				
☐ List additional attachments:					

Note Carefully

Applicant Information

If your application qualifies as a "Development of Regional Impact" (see Article 13) then you must follow additional procedures BEFORE your application can be considered. The Community Development Department will assist you with the DRI process, which is mandated by State and GRTA requirements.

Indicate the current zoning district of the property, and the zoning district you are requesting. File a separate application for each Rezoning request naming a different zoning district. A Special Use request, Variance request can be filed concurrently with a Rezoning request on the same property by separate application.



Application Form

Applicant Information		
Name Michelle Aleda	Phone 404.861.3311	
460 Beogdon Rd. ste 500 Mailing Address Suwanel, GA 30024	Email Michelleallinspoolle@gnail.com	
Variance Request Property Informat		
Address 3255 Birchhaven Tracl	Parcel ID / Lot# 19082000430	
Acreage 0.278 /12,092 59 At	Present Zoning UMKNOWN	
Variance Request MOVL 75 Butter to Leo'		
Source of Water Supply	Source of Sewage Disposal	
Additional Information, If Applicab	le	
Elementary School and School's Capacity	Middle School and School's Capacity	
High School and School's Capacity	Peak Hours Trips Generated	
Notary Attestation		
Executed in Bufold (City), 6A (State).	SINGLE OF THE STATE OF THE STAT	
Manlypleale Michelle Al.	cala 3-18-22	
Subscribed and sworn before me this Printed Name Subscribed and sworn before me this day of March. 20 22	SS OF THE STATE OF	
Candial Long Hoose Constitutions, Signature of Notary Public Name of Notary Public	Hoover //11/24 My Commission Expires My Commission Expires	

For Official Use Only		
PZ # Planning Commission Hearing	City Council Hearing	
Withdrawal Data	Reason for Withdrawal	



Notice of Intent

65	Information			
Name MCMUN ALCOLO 440 BEOGOLON RD. Ste. 500 Mailing Address SUWAYEL, GA 30024		Phone 404-801.3311		
(Mailing Address	440 Beogolon R Suwanel, GA	D. Ste. 500 30024	Email Muchelle. a	llinspooll cognail.com
Notice of	Intent			
	se indicate the purpos			
Rlgulst 1Mg/lou <u>Part II.</u> Plea	TING FOR THE MICE POOL INSTA	75' Buffer of llation ariances:	o Bl Reducid	to 60' to allow an
	ting use of subject prop UNIG USLO	perty:		
	posed use of subject p			
Kroini	untial ingrea	10 poor		
Part V. Othe	er Pertinent Informatio	on (List or attach addition	nal information if neede	d):
1000 0000	t Signature			
Michae Signature of App	Milcala	Michelle J		3-18-22 Date



Applicant's Written Analysis

Applicant Information	
Name Michelle Alcolo	Phone 404.801. 3311
Name MMMILL FICALO 460 BROGOLON ROSTE 500 Mailing Address Suwance, CA 30024	Email nu chelleallin 1 poolle@gnal conc
Written Analysis In details please address th	ese Variance Criteria:
a. because of its size, shape or topography that are not applicab	al difficulties pertaining to the particular piece of property in question le to other lands or structures in the same district.
The Backyord is taken up By	75' and 25' Buffers Not allowing
b. A literal interpretation of the provisions of this development of by other properties of the district in which the property is local contents.	code would effectively deprive the applicant of rights commonly enjoyed
Granting the variance requested will not confer upon the project. are denied to other properties of the district in which the app	
d. The requested variance will be in harmony with the purpose a not be injurious to the neighborhood or to the general welfar	
e. The special circumstances are not the result of the actions of	the applicant.
f. The variance requested is the minimum variance that will madistrict proposed. US. W. Q.L. ONLY RIGHT	ske possible the proposed use of the land, building, or structure in the use 1811 A 16 VARIONCL TO Allow YU INSTALL
The variance shall not permit a use of land, building or structu $^{\mathrm{g}}$ involved.	ures, which is not permitted by right in the zoning district overlay district
Annligant Dianotura	

Applicant Signature

3-18-22