

Powder Springs Application Form

REZONING

Applicant: Paran Homes Telephone No.: 678 414 0906

Applicant's Address: 3005 Breckenridge Blvd, Duluth, Ga 30096

Property Location: 4560 Silver Springs Blvd + 4562 Silver Springs Blvd Land Lot No.: 190 926 0060
Lot 7

Applicant is: Property Owner Other: Attorney for Property Owner (Attach Owner's Authorization)

Other Representative of the Owner (Attach Owner's Authorization)

Current Zoning: _____

Type of Application

Rezoning to: _____

Change in Stipulations of Approval

Attachments

Application Fee Review Checklist

Boundary Description Other: _____

Sketch Plan (Not Required) _____

Impact Studies (Not Required) _____

Campaign Contribution Form _____

I attest that this Application and its attachments are accurate to the best of my knowledge.

[Signature]
Signature of Applicant (to be notarized)



Sworn to and subscribed before me this 17 day of AUG, 2017
Nancy L. Brewer
Notary Public

***** DO NOT WRITE IN THE BOX *****

DRI Forms filed with ARC/DCA/GRTA on: _____ Final determination received on: _____

Application Received Date: 8/17/17

Scheduled for Public Hearing on:

Planning Commission Date: 8/28

Mayor & City Council Date: 9/18

Signs Provided Date: 8/17

Newspaper Ad Date: 8/18

Affidavit Received Date: _____

Notes: _____

Planning Commission

Public Hearing: Date: _____

Tabled Until: Date: _____

Recommendation

Approval

Approval with Stipulations

Denial

No Recommendation

Mayor & Council

Public Hearing: Date: _____

Tabled Until: Date: _____

Returned to P.C. Date: _____

Final Action

Approved

Approved with Stipulations

Denied

Stipulations Attached



Application Withdrawn Date: _____

By Planning Director Without time restriction

By P.C. or Mayor & Council Restriction: Cannot be refiled for _____ months

Applicant: Patan Homms Current Zoning: _____ Proposed Zoning: _____

Property Location: 4560 + 4562 Silver Springs Blvd Land Lot No. _____

Standards for rezoning consideration

The Planning Commission and the Mayor and City Council shall consider the following standards in considering any rezoning proposal, giving due weight or priority to those factors that are appropriate to the circumstances of each proposal:

Standard	YES	NO	Comments
a. Is the proposed use compatible with the purpose and intent of the Comprehensive Plan?	<input type="checkbox"/>	<input type="checkbox"/>	
b. Is the proposed use consistent with the stated purpose of the zoning district that is being requested?	<input type="checkbox"/>	<input type="checkbox"/>	
c. Is the proposed use suitable in view of the zoning and development of adjacent and nearby property?	<input type="checkbox"/>	<input type="checkbox"/>	
d. Will the existing use or usability of adjacent or nearby property not be adversely affected by the proposed use?	<input type="checkbox"/>	<input type="checkbox"/>	
e. Are there substantial reasons why the property cannot or should not be used as currently zoned?	<input type="checkbox"/>	<input type="checkbox"/>	
f. Are or will public facilities such as schools, water or sewer utilities, and police or fire protection be adequate to serve the proposed use?	<input type="checkbox"/>	<input type="checkbox"/>	
g. Is the proposed use supported by new or changing conditions not anticipated by the Comprehensive Plan or reflected in the existing zoning on the property or surrounding properties?	<input type="checkbox"/>	<input type="checkbox"/>	
h. Does the proposed use reflect a reasonable balance between the promotion of the public health, safety, morality, or general welfare and the right to unrestricted use of property?	<input type="checkbox"/>	<input type="checkbox"/>	

Prepared...Date: _____, 20____ for _____ Applicant
 Date: _____, 20____ by _____ Powder Springs Staff
 Date: _____, 20____ by Other: _____

This is to certify that (I am we are I am the Corporate Secretary of a Corporation that is) the owner of a majority interest in the property that is the subject of the attached application.

By execution of this form, this is to authorize the person named as "applicant" below, acting on behalf of the owner, to file for and pursue a request for approval of the following:

(Check each that applies and cross out each that does not apply)

- Rezoning
- Special Use
- Appeal from Administrative Decision
- Special Exception
- Hardship Variance
- Flood Protection Variance

Applicant: Paran Homos

Applicant's Address: 3005 Brackencroft Blvd suite 200
Duluth, Ga 30096

Date this Authorization becomes null and void: 8-17-17, 2017. (Not applicable)

* Whit Mandy
Signature of Owner

(Notarized) Nancy L. Brown

Signature of Owner

(Notarized)

Signature of Owner

(Notarized)

Signature of Owner

(Notarized)



Attach additional sheets as needed

Corporations – attach copy of corporate resolution approving authorization

Applicant:

Applicant's Address:

Applicant's Attorney:

Attorney's Address:

The following information is provided in accordance with the Georgia Conflict of Interest in Zoning Actions Act, O.C.G.A. 36-67A-1 *et seq.*

The property that is the subject of the attached application is owned by:

- Individual(s) Corporation Partnership Limited Partnership Joint Venture

All persons, corporations, partners, limited partners, or joint venturers party to ownership of the property that is the subject of the attached application are listed below:

APPLICANT: Within the two years preceding the date of the attached application, **the applicant** has made campaign contributions or gifts aggregating \$250 or more to the Mayor, to members of the Powder Springs City Council, or to members of the Planning Commission, as follows:

Name of Official	Amount of Contribution or Gift	Date of Contribution or Gift
_____	_____	_____
_____	_____	_____
_____	_____	_____

ATTORNEY: Within the two years preceding the date of the attached application, **the attorney representing the applicant** has made campaign contributions or gifts aggregating \$250 or more to the Mayor, to members of the Powder Springs City Council, or to members of the Planning Commission, as follows:

Name of Official	Amount of Contribution or Gift	Date of Contribution or Gift
_____	_____	_____
_____	_____	_____
_____	_____	_____

Attach additional sheets as needed