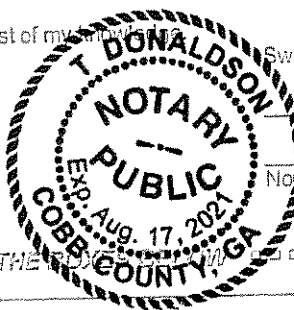


Applicant: Frederick Bryant Telephone No.: 770-769-6473
 Applicant's Address: 3574 Bridgecrest Dr Powder Springs, GA 30127
 Property Location: 3217 New Macland Rd Suite #90 Land Lot No.: _____
 Applicant is: Property Owner Other: Attorney for Property Owner (Attach Owner's Authorization)
 Other Representative of the Owner (Attach Owner's Authorization)

Current Zoning: CRC
 Type of Application
 Special Use: Retail
 Change in Stipulations of Approval
 Attachments
 Application Fee Review Checklist
 Boundary Description Other: STORE LAYOUT
 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. Sworn to and subscribed before me this

Frederick Bryant
Signature of Applicant (to be notarized)



26 day of Sept, 2017
T. Donaldson
Notary Public

DO NOT WRITE IN THE SPACES BELOW

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

Application Received Date: _____
 Scheduled for Public Hearing on:
 Planning Commission Date: _____
 Mayor & City Council Date: _____
 Signs Provided Date: _____
 Newspaper Ad Date: _____
 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Application Withdrawn Date: _____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

Powder Springs

Review Checklist

SPECIAL USE

Applicant: Frederick L Bryant Current Zoning: _____ Proposed Sp. Use: Retail

Property Location: 3217 New Macland Rd #90 Land Lot No. _____

Standards for special use consideration

A special use otherwise permitted within a zoning district shall be considered to be compatible with other uses permitted in the district, provided that due consideration is given to the following objective criteria. Emphasis may be placed on those criteria most applicable to the specific use proposed:

| Standard | YES | NO | Comments |
|---|-------------------------------------|-------------------------------------|----------|
| a. Will the proposed special use be consistent with the stated purpose of the zoning district in which it will be located? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | |
| b. Will the establishment of the special use not impede the normal and orderly development of surrounding property for uses predominate in the area? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| c. Is the location and character of the proposed special use consistent with a desirable pattern of development in general? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | |
| d. Is or will the type of street providing access to the use be adequate to serve the proposed special use? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | |
| e. Is or will access into and out of the property be adequate to provide for traffic and pedestrian safety, the anticipated volume of traffic flow, and access by emergency vehicles? | <input checked="" 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 special use? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | |
| g. Are or will refuse, service, parking and loading areas on the property be located or screened to protect other properties in the area from such adverse effects as noise, light, glare or odor? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | |
| h. Will the hours and manner of operation of the special use have no adverse effects on other properties in the area? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | |
| i. Will the height, size or location of the buildings or other structures on the property be compatible with the height, size or location of buildings or other structures on neighboring properties? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | |

Prepared...Date: 9/26/17, 20 17 for Frederick Bryant Applicant
 Date: _____, 20 _____ by _____ Powder Springs Staff
 Date: _____, 20 _____ by Other: _____