



city of  
powder springs  
**Variance Request**  
Application Checklist

### Applicant Information

Name	Reflections of Trinity	Phone	404 933-1673
Mailing Address	4037 Austell Powder Springs rd Powder Springs GA 30127	Email	ReflectionsofTrinity@gmail.com

### Application Checklist

The following information will be required:

- Application
- Notice of Intent
- Applicant's Written Analysis
- Campaign Contribution Disclosure
- Owner's Authorization, if applicable.
- Legal Description and Survey Plat of the property
- Application Fee (summary of fees attached)
- Copy of the Deed that reflects the current owners name
- Vicinity Map outlining the parcel/s in relation to the surrounding area
- Site plan, plat or survey prepared by an architect, engineer. The following information **must** be included:  
Specific use or uses proposed for the site. Acreage, bearing and distances, other dimensions, and location of the tract(s). Locations, sizes and setbacks of proposed structures, including the number of stories and total floor area, height, for residential number of units, Square footage of heated floor area. Detention/retention areas, and utility easements. Location of dumpsters. Public or private street(s) - right of way and roadway widths, approximate grades. Location and size of parking area with proposed ingress and egress. Specific types and dimensions of protective measures, such as buffers. Landscaping. Wetlands, stream buffers, and 100 year floodplain.
- Sketch Plan/ Architectural Rendering, if applicable
- Traffic Study required for development with 500,000 sf of nonresidential floor area or 350 dwelling units or more.

List additional attachments:

### Note Carefully

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.



**city of  
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**Variance Request**  
Application Form

**Applicant Information**

Name <i>Reflections of Trinity</i>	Phone <i>404 933-1673</i>
Mailing Address <i>4037 Austell Powder Spgs rd</i>	Email <i>ReflectionsofTrinity@gmail.com</i>

**Variance Request Property Information**

Address <i>4033 Louise Street</i>	Parcel ID / Lot# <i>19090500250</i>
Acreage <i>.9</i>	Present Zoning <i>CRC</i>
Variance Request <i>To use house as a shelter for traveling medical staff.</i>	
Source of Water Supply	Source of Sewage Disposal

**Additional Information, If Applicable**

Elementary School and School's Capacity	Middle School and School's Capacity
High School and School's Capacity	Peak Hours Trips Generated

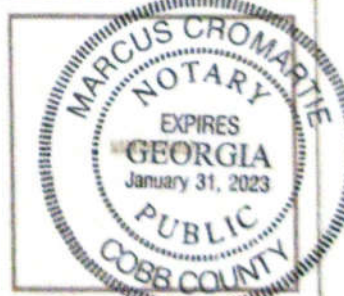
**Notary Attestation**

Executed in \_\_\_\_\_ (City), \_\_\_\_\_ (State).

<i>Eileen Miller</i>	<i>EILEEN MILLER</i>	<i>3/8/22</i>
Signature of Applicant	Printed Name	Date

Subscribed and sworn before me this *8* day of *March* 20 *22*

<i>Marcus Cromartie</i>	<i>MARCUS CROMARTIE</i>	<i>1/31/2023</i>
Signature of Notary Public	Name of Notary Public	My Commission Expires



**For Official Use Only**

PZ #	
Planning Commission Hearing	City Council Hearing
Withdrawal Date	Reason for Withdrawal



**city of  
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**Variance Request**  
**Notice of Intent**

**Applicant Information**

Name	Reflections of Trinity	Phone	404 933-1673
Mailing Address	4037 Austell Powder Spgs rd	Email	Reflectionsoftrinity@gmail.com

**Notice of Intent**

**PART I. Please indicate the purpose of this application:** Request for Variance to use property for Sheltering <sup>Traveling</sup> Medical Personnel even though we are adjacent to residential property & medical personnel will be working different hospital shifts so will not vacate by 8 AM.

**PART II. Please list all requested variances:** Unified Development Code Sec. 4-95  
 b.) Duration of Stay - guest cannot comply with 8 AM restrictions.  
 c.) Distance Separation - Property is adjacent to residential properties on 2 sides.

**Part III. Existing use of subject property:** Property has been vacant since purchased in April 2021

**Part IV. Proposed use of subject property:** Would like to use this property as temporary housing for traveling medical staff on short term contracts, usually 13 weeks or less.

**Part V. Other Pertinent Information (List or attach additional information if needed):** The house was previously used as a convalescent home for 3 Elders. Each room has its own entrance. The house is wheelchair accessible & each room has its own bathroom. The set up is perfect for traveling medical staff especially in light of the current housing shortage.

**Applicant Signature**

	Eileen Miller	3/8/22
Signature of Applicant	Printed Name	Date



city of  
powder springs

# Variance Request

## Applicant's Written Analysis

### Applicant Information

Name	Reflections of Trinity	Phone	404 933-1673
Mailing Address	4037 Austell Powder Spgs rd	Email	ReflectionsofTrinity@gmail.com

### Written Analysis

In details please address these Variance Criteria:

a. Are there extraordinary and exceptional conditions or practical difficulties pertaining to the particular piece of property in question because of its size, shape or topography that are not applicable to other lands or structures in the same district.  
No The property has no extraordinary or exceptional conditions or practical difficulties

b. A literal interpretation of the provisions of this development code would effectively deprive the applicant of rights commonly enjoyed by other properties of the district in which the property is located N/A

c. Granting the variance requested will not confer upon the property of the applicant any special privileges that are denied to other properties of the district in which the applicant's property is located Not to my knowledge

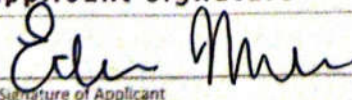
d. The requested variance will be in harmony with the purpose and intent of this development code and will not be injurious to the neighborhood or to the general welfare. Absolutely! There is a shortage of housing & a labor shortage. Hospitals are paying top dollar for traveling medical staff. Granting this variance provides short term housing for these travelers & benefits the community.

e. The special circumstances are not the result of the actions of the applicant.  
They Are Not

f. The variance requested is the minimum variance that will make possible the proposed use of the land, building, or structure in the use district proposed. Correct.

g. The variance shall not permit a use of land, building or structures, which is not permitted by right in the zoning district overlay district involved. Correct.

### Applicant Signature

	Eileen Miller	3/8/22
Signature of Applicant	Printed Name	Date



## Campaign Contribution Disclosure

### Applicant and Attorney Information

Applicant's Name <i>Reflections of Trinity</i>	Applicant's Address <i>4037 Austell Powder Springs rd</i>
Applicant's Attorney <i>N/A</i>	Attorney's Address <i>N/A</i>

### Campaign Contribution Disclosure

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 ventures party to ownership of the property that is the subject of the attached application are listed below:

*Reflections of Trinity Inc.*  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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:

*N/A*

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
_____	_____	_____



city of  
powder springs  
**Variance Request**  
Owner's Authorization Form

**Owner's Authorization**

Applicant Name <u>Reflections of Trinity Inc</u>	Applicant's Address <u>4057 Ansell Powder Spg rd</u>
Property Address <u>4033 Louise Street, Powder Springs, GA</u>	Property PIN

This is to certify that I am  or We are  or I am  the Authorized Representative of a Corporation that is the owner of a majority interest in the subject property of the attached application. By execution of this form, this is to authorize the person names as "applicant" below, acting on behalf of the owner, to file for and pursue a request for approval of the following:

Check all that apply:

Rezoning <input type="checkbox"/>	Special Use <input type="checkbox"/>	Hardship Variance <input checked="" type="checkbox"/>
Special Exception <input type="checkbox"/>	Flood Protection Variance <input type="checkbox"/>	Appeal of Administrative Decision <input type="checkbox"/>

**Signature of Property Owner(s)**

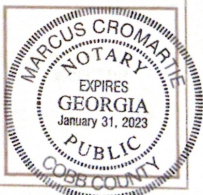
Eileen Miller Eileen Miller 3/8/22  
Signature of Owner Printed Name Date

State of GA, County of Douglas

This instrument was acknowledged before me this 8 day of March

20 22, by Eileen Miller Identification Presented DL

Marcus Cromatic Marcus Cromatic 1/31/2023  
Signature of Notary Public Name of Notary Public My Commission Expires



Signature of Owner \_\_\_\_\_ Printed Name \_\_\_\_\_ Date \_\_\_\_\_

State of \_\_\_\_\_, County of \_\_\_\_\_.

This instrument was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

20 \_\_\_\_\_, by \_\_\_\_\_, name of signor Identification Presented \_\_\_\_\_

Signature of Notary Public \_\_\_\_\_ Name of Notary Public \_\_\_\_\_ My Commission Expires \_\_\_\_\_





## Affidavit of Public Notification

### Public Notification Requirements

Per Article 13 and 14 of the City of Powder Springs Unified Development Code, I certify that I have met the advertising requirements of Article 13 and Article 14 for a  Special Use,  Variance or  Rezoning application for subject property located at 4033 Louise Street, Powder Springs GA 30107

Notices were mailed to all persons owning property located in whole or in part within 200 feet of any portion of the property that is the subject of the rezoning, special use or variance application. The written notice was mailed to the property owners as such names and addresses appear on the County's current ad valorem tax records on March 7 2022. Said notices were mailed at least 15 days but no more than 45 days prior to the Mayor and Council first public hearing date.

Signs were placed on the subject property advertising said hearing on March 8 2022. One sign was placed at each road frontage at least 15 days prior to the Mayor and Council first hearing date.

Please attach the following to affidavit: notices, list of addresses, picture of sign posted on property and any receipt or documentation that was provided at the post office.

Please sign affidavit after letters have been mailed out to neighboring lot owners within 200 feet of the subject site and sign/s have been posted on subject site.

### Notary Attestation

Executed in \_\_\_\_\_ (City), \_\_\_\_\_ (State)

Eileen Miller EILEEN MILLER 3/8/22  
Signature of Applicant Printed Name Date

Subscribed and sworn before me this 8 day of MARCH 2022

Marcus Cromaric MARCUS CROMARIC 1/31/2023  
Signature of Notary Public Name of Notary Public My Commission Expires

