

P&Z 09-21-20



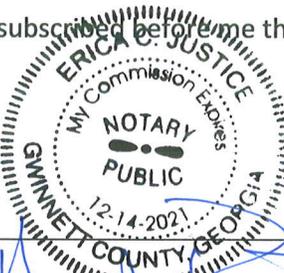
Variance Application

<b>Type</b>	Type of Request: <input type="checkbox"/> Zoning/Special Exception <input type="checkbox"/> Sign <input type="checkbox"/> Stream Buffer <input checked="" type="checkbox"/> Other <i>VARIANCE</i> <input type="checkbox"/> Administrative (Zoning/Special Exception or Stream Buffer)			
	Applicable Zoning/Sign Code Section:			
	Nature of Request:	Required:	Proposed:	Minimum Setback Requirements
	<input checked="" type="checkbox"/> Setback	(See Chart to the Right)		Front <i>35'</i>
	<input type="checkbox"/> Sign			Side <i>10'</i>
<input type="checkbox"/> # Parking Spaces			Rear <i>40'</i>	
<input type="checkbox"/> Other			Other	
<b>Project</b>	Name of Project/Subdivision: <i>ROATH HOUSE ADDITION</i>		Present Zoning: <i>RS-100</i>	
	Property Address/Location: <i>3520 INMAN DRIVE BROOKHAVEN, GA 30319</i>			
	District: <i>18</i>	Land Lot: <i>276</i>	Block: <i>9</i>	Property ID: <i>18-276-19-030</i>
	Is this development and/or request seeking any incentives or tax abatement through the City of Brookhaven or any entity that can grant such waivers, incentives, and/or abatements? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<b>Owner Information</b>	Name: <i>DENISE + HOWARD ROATH</i>			
	Address: <i>3520 INMAN DRIVE BROOKHAVEN, GA 30319</i>			
	Phone:	Fax:		
<b>Applicant</b>	Cell: <i>404-934-2726</i>	Email: <i>DENISE.ROATH@MOREBIZZ.NET</i>		
	Name: <i>KRISTEN WARE, WARE + ASSOCIATES ARCHITECTS</i>			
	Address: <i>5825 GLENRIDGE DR. BLDG 3, STE 1014 ATLANTA, GA 30328</i>			
	Phone: <i>404-816-9122</i>	Fax:		
<b>Affidavit</b>	Cell: <i>404-459-0824</i>			
	Email: <i>KRISTEN@WAREASSOC.COM</i>			
	To the best of my knowledge, this variance application form is correct and complete. If additional materials are determined to be necessary, I understand that I am responsible for filing additional materials as specified by the City of Brookhaven Zoning Ordinance. I understand that failure to supply all required information (per the relevant Applicant Checklists and Requirements of the Brookhaven Zoning Ordinance) will result in the rejection of this application. I have read the provisions of the Georgia Code Section 36-67A-3 as required regarding Campaign Disclosures. My Signed Campaign Disclosure Statement is included			
<b>Notary</b>	Applicant's Name: <i>KRISTEN A. WARE</i>			
	Applicant's Signature: <i>Kristen Ware</i>			Date:
	Sworn to and subscribed before me this _____ Day of _____ 20____			
<b>Office Use</b>	Notary Public:			
	Signature:			
	Date:			
Application Received By:		Project Title:	Project Number:	
<input type="checkbox"/> Application Fee <input type="checkbox"/> Sign Fee (\$135 per 500 feet per frontage) <input type="checkbox"/> Legal Fee (\$20)				
Fee: \$		Payment: <input type="checkbox"/> Cash <input type="checkbox"/> Check <input type="checkbox"/> CC		Date:
<input type="checkbox"/> Approved <input type="checkbox"/> Approved with Conditions <input type="checkbox"/> Denied				Date:

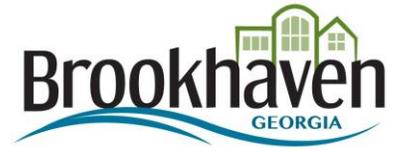
Property Owner(s) Notarized Certification

The owner and petitioner acknowledge that this variance application form is correct and complete. By completing this form, all owners of the subject property certify authorization of the filing of the application for variance(s), and authorization of an applicant or agent to act on their behalf in the filing of the application including all subsequent application amendments.

Property Owner	Signature: <u>Denise F. Cook</u>	Date: <u>9/17/20</u>	
	Address: <u>3520 INMAN DR. N.E.</u>	City, State: <u>BROOKHAVEN GA</u>	Zip: <u>30319</u>
	Phone: <u>404.934.2726</u>		
	Sworn to and subscribed before me this <u>16</u> day of <u>September</u> , 20 <u>20</u>		
	Notary Public: <u>[Signature]</u>		
Property Owner (If Applicable)	Signature: <u>[Signature]</u>	Date: <u>9/17/20</u>	
	Address: <u>3520 INMAN DR N.E</u>	City, State: <u>BROOKHAVEN GA</u>	Zip: <u>30319</u>
	Phone:		
	Sworn to and subscribed before me this <u>16</u> day of <u>September</u> , 20 <u>20</u>		
	Notary Public: <u>[Signature]</u>		
Property Owner (If Applicable)	Signature:	Date:	
	Address:	City, State:	Zip:
	Phone:		
	Sworn to and subscribed before me this _____ day of _____, 20_____		
Notary Public:			







PRE-APPLICATION FORM
LAND USE PETITIONS AND VARIANCE PETITIONS

Purpose & Process

A Pre-Application Meeting provides you the opportunity to present a conceptual plan and letter of intent to a representative of the Community Development Department. This meeting benefits you, the applicant, by receiving general comments on the feasibility of the plan, the process(es)/procedure(s) and fees required to process and review the application(s). To schedule a meeting contact a member of the Planning and Zoning Department by calling (404) 637 – 0500. This form will be completed during the pre-application meeting, and must be submitted at the same time you submit your application in order for your submittal to be deemed complete.

Applicant Name: Kristen Ware Phone: \_\_\_\_\_

Applicant E-mail: kristen@wareassoc.com Fax: \_\_\_\_\_

Representative Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Representative E-mail: \_\_\_\_\_ Fax: \_\_\_\_\_

Site Address: 3520 Inman Drive Parcel Size: \_\_\_\_\_

Tax Parcel #: 18-276-19-030 City Council District: 1 - Jones

Existing Zoning and Case Number: RS-100 (ZBA17-11) Proposed Zoning: NA

Comprehensive Plan Character Area Map Designation: Lakes District

Application Type: [ ] Rezoning [ ] Special Land Use Permit [x] Variance [ ] Special Exception

Variance Type: [ ] Administrative [x] Zoning Board of Appeals [ ] Stream Buffer

Overlay District: [ ] Brookhaven-Peachtree Subarea I [ ] Brookhaven-Peachtree Subarea II

Additional Studies: [ ] Trip Generation Report [ ] Traffic Impact Study
[ ] Development of Regional Impact Review [ ] Environmental Impact Review

Proposal Description: Reduce interior side setback from 10-feet to 8.5-feet.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Planner Signature: [Handwritten Signature] Date: 09-17-20

