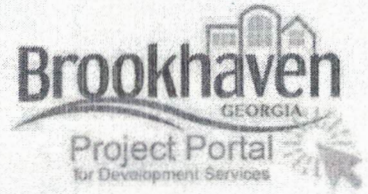


Variance & Special Exception Application

All applications and plans must be submitted through the Project Portal
<https://Cityworks.BrookhavenGA.gov/ProjectPortal>



Variance Application

PROPERTY		
Site Address: 1034 ANTIOCH DRIVE	Parcel #: 18 275 14 049	Zip: 30319
Project Name (If applicable):		Present Zoning:

TYPE OF REQUEST		
<input type="checkbox"/> Zoning/Special Exception <input type="checkbox"/> Sign <input type="checkbox"/> Stream Buffer <input type="checkbox"/> Administrative (Zoning/Special Exception or Stream Buffer)		
Nature of Request	Required per Code	Proposed
<input type="checkbox"/> Setback	Front: 30 Side: 7.5 Rear: 40 Other: _____	Front: 30 Side: 7.5 Rear: 7.5 Other: _____
<input type="checkbox"/> Stream Buffer		
<input type="checkbox"/> Impervious Coverage	%	%
<input type="checkbox"/> Sign		
<input type="checkbox"/> # of Parking Spaces		
<input type="checkbox"/> Other _____		

OWNER INFORMATION	
Name:	YINKIN ALVAREZ
Address:	3167 OSBORNE RD NE, BROOKHAVEN, GA 30319
Email:	yinki@hotmail.com
Phone:	678-908-1003

APPLICANT	
Name:	YINKIN ALVAREZ
Address:	3167 OSBORNE RD NE, BROOKHAVEN, GA 30319
Email:	yinki@hotmail.com
Phone:	678-908-1003

AFFIDAVIT

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.

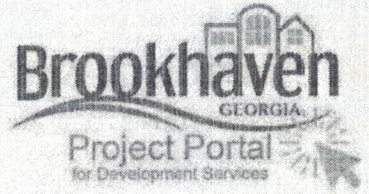
Applicant's Name:	YINKIN ALVAREZ
Applicant's Signature:	
Date:	03/20/24

NOTARY	
Sworn to and subscribed before me this 20 Day of March 20 24	
Notary Public:	JUSTIN EDOE
Signature:	
Date:	03/20/24

Variance & Special Exception Application

All applications and plans must be submitted through the Project Portal

<https://Cityworks.BrookhavenGA.gov/ProjectPortal>



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			
Name:	YINKIN ALVAREZ		
Address:	3167 OSBORNE RD NE	City, State:	BROOKHAVEN, GA Zip: 30319
Signature:		Date:	03/20/24
Sworn to and subscribed before me this <u>20</u> day of <u>March</u> , 20 <u>24</u>			
Notary Public:	<div style="border: 1px solid black; padding: 5px; text-align: center;"> JUSTIN EDGE NOTARY PUBLIC Henry County State of Georgia My Comm. Expires Aug. 29, 2026 </div>		

Additional Property Owner (if applicable)			
Name:			
Address:		City, State:	Zip:
Signature:		Date:	
Sworn to and subscribed before me this _____ day of _____, 20____			
Notary Public:			

Additional Property Owner (if applicable)			
Name:			
Address:		City, State:	Zip:
Signature:		Date:	
Sworn to and subscribed before me this _____ day of _____, 20____			
Notary Public:			

Variance & Special Exception Application

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Campaign Disclosure Statement

Have you, within the two years immediately preceding the filing of this application, made campaign contributions aggregating \$250.00 or more to a member of the City of Brookhaven City Council or a member of the City of Brookhaven Planning Commission?

Yes

No

Applicant/Property Owner			
Name:	YINKIN ALVAREZ		
Address:	3167 OSBORNE RD NE	City, State:	BROOKHAVEN, GA Zip: 30319
Signature:			Date: 03/20/2024

If the answer above is yes, please complete the following section:

Date	Government Official & Position	Description	Amount

QUIT CLAIM DEED

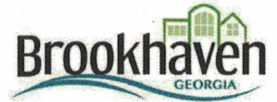
THIS QUITCLAIM DEED, executed this 6 day of December, 2021, by first party, Grantor, Lyn Investment Construction, whose address is 3219 Georgia Ave, Brookhaven GA 30319 to second party, Grantee, ERA Ventures LLC whose address is 3167 Osborne rd. Atlanta GA 30319 **and** Lyn Investment Construction whose address is 3219 Georgia Ave. Brookhaven GA 30319,

WITNESSETH, That the said first party, for good consideration and for the sum of One Dollars (\$1) paid by the said second party, the receipt whereof is hereby acknowledged, does hereby remise, release and quitclaim unto the said second party forever, all the right, title, interest and claim which the said first party has in and to the following described parcel of land, and improvements and appurtenances thereto in the County of DeKalb, State of Georgia to wit:

ALL THAT TRACT OR PARCEL OF land lying and being in Land Lot 275 of the 18th District, DeKalb County, Georgia and being more particularly described as follows: Parcel ID: 18 275 14 049 as 1034 antioch dr. Commence at an iron pin set at the intersection of the easterly right-of-way line of Georgia Avenue (50' right-of-way) and the northerly right-of-way line of Antioch Drive (30' right- of-way), said point being known as the TRUE POINT OF BEGINNING; Thence North 21°05'11" East a distance of 134.97' to a point; Thence South 69°43'08" East a distance of 146.33' to a point; Thence South 20°48'05" West a distance of 66.00' to a point; Thence North 69°43'08" West a distance of 98.00' to a point; Thence South 20°48'05" West a distance of 68.97' to a point; Thence North 69°43'08" West a distance of 49.00 feet to a point, said point being known as the TRUE POINT OF BEGINNING. Said parcel containing 13,035 square feet or 0.2992 acres.

PRE-APPLICATION MEETING FORM

LAND USE PETITIONS & VARIANCE APPLICATIONS



4362 Peachtree Road, Brookhaven, GA 30319
 Phone: 404-637-0500 • Fax: 404-637-0501
 www.BrookhavenGA.gov

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 an application. To schedule a meeting, contact a member of the Planning and Zoning Division by calling (404) 637-0500 or via email at Planning@BrookhavenGA.Gov. This form will be completed during the pre-application meeting and must be submitted with the application for the submittal to be deemed complete.

Applicant Name	Yinkin Alvarez	Applicant Email	yinki@hotmail.com
Applicant Phone			
Site Address	1034 ANTIOCH DRIVE	Parcel Size	13,089 SF
Tax Parcel #	18 275 14 049	City Council District	1- DIAZ
Existing Zoning & Case	RS-75	Proposed Zoning	RS-75
Overlay District	N/A	Character Area	LYNNWOOD PARK

Request	Fees
<input type="checkbox"/> Rezoning	
<input type="checkbox"/> with Concurrent Variances	Application Base 250 \$
<input type="checkbox"/> Special Land Use Permit	Additional Request + (#) 200 \$
<input checked="" type="checkbox"/> Board of Appeals Variance	Public Notice Sign x (1) 160 \$
<input type="checkbox"/> Administrative Variance	Public Notice Advertisement 20 \$
<input type="checkbox"/> Stream Buffer	Estimated Total 630 \$
<input type="checkbox"/> Sign	

Deadlines and Public Hearing Dates

Meeting Deadline (If Applicable)	March 27, 2024
Commission or Board Meeting Date (If Applicable)	May 15, 2024

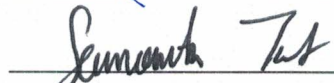
Additional Studies

<input type="checkbox"/> Trip Generation	<input type="checkbox"/> Traffic Impact Study
<input type="checkbox"/> Development of Regional Impact Review	<input type="checkbox"/> Environmental Impact Review

Proposal Description

SEC 27-67 - REAR & SIDE STREET SETBACK + ~~ALLOW ACCESSORY STRUCTURE IN NON~~
~~REAR YARD~~

Applicant Signature:  Date: 3/19/24

Planner Signature:  Date: 3/14/24