P&Z 03-27-24



Variance Application

	Type of Request: ☐ Zoning/☐ Adminis	/Special Exception			Other				
Туре	Applicable Zoning/Sign Code Section: 27 - 1334								
	Nature of Request:	Required:	Proposed:	Minimum Require			Proposed Setback Requirements		
	☐ Setback	(See Chart to	o the Right)		Front		Front		
	☐ Sign				Side (C		Side 5.5		
	☐ # Parking Spaces				Rear		Rear		
	☐ Other				Other		Other		
	Name of Project/Subdivision:	Present Zoning:			ning:				
#	Property Address/Location:	2496 Appalach	ce Dr						
Project	District:	Land Lot:	Block:			Property II	0: 18 238 13 013		
	can grant such waivers, incent	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?							
Ē	Name: Share A:L	chison							
ner atio	Name: Shane Ait Address: 2496 Apr	palachee Driv	e						
Owi	□ Yes M No Name: Shane A:L Address: 2496 App Phone: 917-476-2		Fax:						
드	Cell: 646-456-43		Email: Shone.	nitel	ni son@	amail	· (ov		
	Name: Chase Wujcik								
Applicant	Address: 4505 Banford D1						i .		
Appl	Phone: 770-831-5	Fax:							
	Cell:		Email: pur	***************************************					
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								
MAN WAY AS	Applicant's Name: Jazzah Chase Wije:k								
	Applicant's Signature:			Bate: 2	ATIM				
otary	Sworn to and subscribed befo	20	243	MMO . C	ISS/O				
	Notary Public: Lisa WILS				1111	Z NC	TAN SE		
	Signature: كالكاما			7 2 8 BI	IC SE				
ce Use	Date: 310012	4	1			CO.	3025.		
	Application Received By:		Project Title:		F	roject Nun	pber:		
	☐ Application Fee ☐ Sign Fee (\$135 per 500 feet per frontage) ☐ Legal Fee (\$20)								
	Fee: \$	Payment: [🗖 Cash 🚨 Check 🖟	⊒ cc		Date:			
	☐ Approved ☐ Approved w	ith Conditions Denied		Da	ate:				

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

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Campaign Disclosure Statement

Have	you,	within	the	two	years	immediately	preceding	the	filing	of	this
applica	ation,	made	camp	oaign	contril	outions aggre	egating \$25	0.00	or mo	re i	to a
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											
Brookh	naven	Plannir	ng Co	mmis	sion?						,

☐ YES 💆 NO

nt /	Signature	: Share	Aitchiron De	Alun	
pplica	Address:	2496	Appalachee Drive		
4	Date:	3/26			

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

Date	Government Official	Official Position	Description	Amount			

P&Z 03-27-24



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: <u>Cha</u>	se Wujcik	Phone:		
Applicant E-mail: <u>per</u>	rmits@neptunepools.com	Fax:		
Representative Name:		Phone:		
Representative E-mail:	·	Fax:		
Site Address: 2496 A	ppalachee Drive	Parcel Size:		
Tax Parcel #:		City Council District:		
Existing Zoning and Ca	ase Number:	Proposed Zoning:		
Comprehensive Plan C	Character Area Map Designation:			
Application Type:	☐ Rezoning ☐ Special Land Use Permit	☑ Variance ☐ Special Exception		
Variance Type:	☐ Administrative ☐ Zoning Board of Ap	opeals		
Overlay District:	☐ Brookhaven-Peachtree Subarea I ☐ Bro	ookhaven-Peachtree Subarea II		
Additional Studies:	☐ Trip Generation Report☐ Development of Regional Impact Review	☐ Traffic Impact Study ☐ Environmental Impact Review		
Proposal Description:	Reduce accessory structure interior side	e setback for swimming pool.		
Applicant Signature: _		Date:		
Planner Signature:	Drus Mum	Date: 03-08-24		