PLANNING AND DEVELOPMENT DEPARTMENT 2875 BROWNS BRIDGE ROAD, GAINESVILLE, GA, 30504 MAILING ADDRESS: PO BOX 1435, GAINESVILLE. GA 30503 t: 770-531-6809 I f: 770-531-3902



ZONING APPLICATION

Applicant (Name & Mailing Address)	Property Owner (Name & Mailin	The state of the s
TORRIS J. BABBS, PE	JUAN R. JIME	HEL
1836 CAGROLLON VILLA GICA HWY.	1484 HIGH CO	MON CT.
Suite 108 VILLA RICA, 6x 30180		E, 64 30043
Phone Off. (7) 878-2338 Mob. (256) 452-296	Phone 678 - 756	3600
Email Address that is a bashsengry. com	Email AddressIM @	enezmalogmal.com
Proposed Use BOAT + RV STORAGE		
Contact Person (Name & Mailing Address)	Status of Applicant	Requested Action
TORRES J. BABBS, P.E.	□ Owner	Existing Zoning: H-B
1836 Carrellton VICLA RICA HWY Ste	_/ ○ 8 □ Option to Purchase	Rezone to:
VILLA RICA, 6A. 30180	_ □ Area Resident	Fee:\$
Phone 256.452, 2965	_ Other	Receipt #: 859043
Email Address thabbsababbsengig.	<u>L</u> am	Check #: 28173996775
Tax Parcel Number 67329 00 1005	Acreage 2.17:	3 4465
Location Address 5741 HOLIDAY RD		
I hereby certify that the above information and all attached	d information are true and corre	
Sign		_Date:_ 9 - 12 - 2012_
Applicant must complete all information above. Failure	e to complete this section will r	esult in the refusal of the
application. The Planning Department has 15 days to	o review all applications and wi	ll set the dates for each
application. If the application is found insufficient, an a submitted. Please note that the Planning Commis	genda date will not be set until	tne required information is dates are tentative.
- Capitalia and the capitalian a		
Application Withdrawal: I hereby withdraw the application.		
Sign		_ Date:
Staff Use Only		
Application Date: Ta	aken by:	
THE RESIDENCE OF THE PROPERTY	entative County Commission Date: _	12/08
County Commission District: 2		

ZON 2022-00086

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AUTHORIZATION OF PROPERTY OWNERS

Note: If the applicant is the property owner, please disregard this form.

Name of owner(s) _ Address	JUAN R. JIMENEZ 1484 HIGH COTTON CT. LAWRENCEVILLE, GA 30043 678.756 3600			
Phone Number _	678.756 3600			
Name of applicant(s)	TORRIS J. BABBS, P.E.			
Address	PO BOX 681 CARROLLTON; GA 301 OFF. 770. 878.2338 MOBILE: 256. 452 296			
Phone Number	OFF. 770. 878.2338 MOBILE: 256. 452 296	5		
I swear that I am the owner of the property which is the subject matter of the attached applications as shown in the records of Hall County, Georgia.				
I authorize the person named above to act as applicant in the pursuit of a rezoning, permissive use, or variance of this property.				
Signature of Owner(s)	2			
Personally appeared I	before me / M Ams >			
who swears that the in knowledge and belief.	nformation contained in this authorization is true and correct to the best of his/her			
Notary Rublic	Date 9/13/2022			
WILLIAM STATE	ON OTARY TO BUSINESS OF STREET OF ST			

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CAMPAIGN CONTRIBUTIONS DISCLOSURE FORM

This form must be completed by the applicant and property owner, or person representing the property owner, for all zoning actions.

OCGA § 36-67A-3[C] Disclosure of campaign contributions:

- (b) When any applicant for zoning action has made, within two years immediately preceding the filing of the applicant's application for the zoning action, campaign contributions aggregating \$250.00 or more to a local government official who will consider the application, it shall be the duty of the applicant to file a disclosure report with the governing authority of the respective local government showing:
- (3) The name and official position of the local government official to whom the campaign contribution was made; and
- (4) The dollar amount and description of each campaign contribution made by the applicant to the local government official during the two years immediately preceding the filing of the application for the rezoning action and the date of each such contribution.
 - (b) The disclosures required by subsection (a) of this Code section shall be filed within ten days after the application for the zoning action is first filed. (Code 1981, Section OCGA § 36-67A-3[C], enacted by GA L. 1986, page 1269, Section 1, GA L. 1991, page 1365, Section 1).

I hereby certify that I have read the above and that:	
I have** I have n	ot <u>×</u>
within the two years immediately preceding this date, made any c to any local government official involved in the review or consider	contribution(s) aggregating \$250.00 or more ration of this application.
**If you have made such contributions, you must provide the data this application.	a required below within ten (10) days of filing
Name of Official(s):	Office:
Dollar Amount:	Date of Contribution:
Applicant's/Owner's Signature:	Date: 9/15/22
Applicant's/Owner's Name (Printed): Torris J. B.	ABBS