

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

RECEIVED

MAR 23 2023

Planning & Zoning Department



CONDITIONAL USE APPLICATION

Applicant (Name & Mailing Address)

Property Owner (Name & Mailing Address)

PATRICIA M. EGAN

~~SAME~~ WILLOW CREEK FARM  
OF TALMO

752 CARDINAL DR

BLUE RIDGE GA 30513

Phone (678) 697-6895

Phone

Email Address TRISHAE007@GMAIL.COM

Email Address

Proposed Use HORSE BOARDING FOR RECREATIONAL USE

Contact Person (Name & Mailing Address)

SAME

Status of Applicant

Requested Action

Owner

Permissive Use:

Option to Purchase

HCPC  HCC

Area Resident

Fee: \$ 1000.00

Other

Receipt #: 859111

Zoning:

Check #: 1512

Tax Parcel Number 15024000019 PB 20617544 Agreement 87

Location Address 3724 ROY PARKS RD TALMO

I hereby certify that the above information and all attached information are true and correct.

Sign Patricia M Egan

Date: 3-23-23

Applicant must complete all information above. Failure to complete this section will result in the refusal of the application. The Planning Department has 15 days to review all applications and will set the dates for each application. If the application is found insufficient, an agenda date will not be set until the required information is submitted. Please note that the Planning Commission and County Commission dates are tentative.

Application Withdrawal: I hereby withdraw the application.

Sign \_\_\_\_\_ Date: \_\_\_\_\_

Staff Use Only

Application Date: \_\_\_\_\_ Taken by: \_\_\_\_\_

Tentative Planning Commission Date: 03/05/23 Tentative County Commission Date: 06/22/23

County Commission District: \_\_\_\_\_

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**AUTHORIZATION OF PROPERTY OWNERS**

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

Name of owner(s) WILLOW CREEK FARM OF TALHO LLC  
Address 752 CARDINAL DR  
BLUE RIDGE, GA 30513  
Phone Number 678-697-6895  
Name of applicant(s) PATRICIA M EGAN  
Address 752 CARDINAL DR  
BLUE RIDGE GA 30513  
Phone Number 678 697-6895

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)  
Patricia M Egan

Personally appeared before me  
Anael Dominguez

who swears that the information contained in this authorization is true and correct to the best of his/her knowledge and belief.

Anael Dominguez  
Notary Public



3-23-2023  
Date

### 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 not

within the two years immediately preceding this date, made any contribution(s) aggregating \$250.00 or more to any local government official involved in the review or consideration of this application.

\*\*If you have made such contributions, you must provide the data required below within ten (10) days of filing this application.

Name of Official(s): \_\_\_\_\_

Office: \_\_\_\_\_

Dollar Amount: \_\_\_\_\_

Date of Contribution: \_\_\_\_\_

Applicant's/Owner's Signature: Patricia M Egan

Date: 5-3-23

Applicant's/Owner's Name (Printed): PATRICIA M EGAN

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Office: \_\_\_\_\_

Dollar Amount: \_\_\_\_\_

Date of Contribution: \_\_\_\_\_

Applicant's/Owner's Signature: Patricia M Egan

Date: 7-3-23

Applicant's/Owner's Name (Printed): PATRICIA M EGAN