

ZONING APPLICATION

Applicant (Name & Mailing Address)

Rochester/DCCM

425 Oak St.

Gainesville, GA 30501

Phone 678-450-5175

Email Address bkdunckel@rochester-assoc.com

Proposed Use Residential Rental Community

Contact Person (Name & Mailing Address)

Bradley Dunckel

425 Oak St.

Gainesville, GA 30501

Phone 678-450-5175

Email Address bkdunckel@rochester-assoc.com

Tax Parcel Number 15041 000008, 15041 000054, 15041 000055, 15041 000091, 15041 000092, 15041 000106, 15041 000122

Location Address 5342 & 5354 Thompson Mill Road

Property Owner (Name & Mailing Address)

Kenneth Edwin Coffey & Clarence Michael Coffey

5342 & 5354 Thompson Mill Road

Hoschton, GA 30548

Phone 770-540-4464

Email Address casey.coffey@yahoo.com

Status of Applicant

Owner

Existing Zoning: AR-IV

Option to Purchase

Rezone to: PRD

Area Resident

Fee: \$ 750.00

Other

Receipt #: _____

Check #: _____

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

Sign 

Date: 7/1/23

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: _____

Tentative County Commission Date: _____

County Commission District: _____

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



AUTHORIZATION OF PROPERTY OWNERS

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

Name of owner(s) Casey K. Coffey & Clarence Michael Coffey

Address 5342 & 5354 Thompson Mill Road
Hoschton, GA 30548

Phone Number _____

Name of applicant(s) Rochester/DCCM

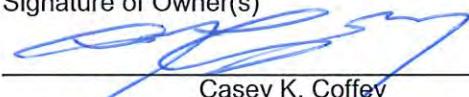
Address 425 Oak St.
Gainesville, GA 30501

Phone Number 678-450-5122

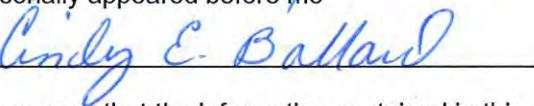
I swear that I am the owner of the property which is the subject matter of the attached applications as shown in the records of Hall County, Georgia.

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)

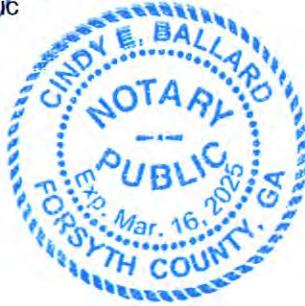

Casey K. Coffey

Personally appeared before me


Cindy E. Ballard

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

Notary Public



Date

6-2-2023

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.

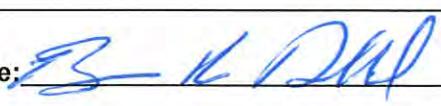
****If you have made such contributions, you must provide the data required below within ten (10) days of filing this application.**

Name of Official(s): _____

Office: _____

Dollar Amount: _____

Date of Contribution: _____

Applicant's Signature: 

Date: 7/7/23

Applicant's Name (Printed): Bradley Dunckel

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****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:

Owner's Signature:

Date: 6-2-23

Owner's Name (Printed): Casey K. Coffey

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****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): Clarence Michael Coffey

Office: Planning and Development

Dollar Amount: \$0.00

Date of Contribution: 6-2-23

Owner's Signature: Clarence Michael Coffey

Date: 6-2-23

Owner's Name (Printed): Clarence Michael Coffey