

VARIANCE APPLICATION

Applicant (Name and Mailing Address)

Property Owner (Name and Mailing Address)

DOUBLE E PROPERTIES, LLC
439 GREEN STREET NW
GAINESVILLE, GA 30501

CECELIA A. HENNIG
241 LEGACY DRIVE
DEMOREST, GA 30535

Phone 404-925-4045

Phone 770-540-2243

Email Address elizabethewansee123@gmail.com

Email Address cece001@bellsouth.net

Location of Property TRIBBLE GAP ROAD, ALTO, GA 30510

Present Zoning PCD & AR-IV Existing Structures NO EXISTING STRUCTURES

Type of Appeal:

Setback Variance (BUFFER)

Road Frontage Variance

Sign Variance

Hardship Mobile Home

Front Yard

Right Side Yard

Left Side Yard

Rear Yard

Road Frontage

Sign Area

Sign Height

Doctor's Letter

From ft. to ft.

From ft. to ft.

From 50 ft. to 25 ft.

From 50 ft. to 25 ft.

From ft. to ft.

From ft. to ft.

From ft. to ft.

Terms Agreement

Supporting Documents: Plat of Property

Site Plan

Deed of Property

Floor Plans

Hardship Statement

Other

Fee (Must be paid for application to be complete): \$

Hardship Mobile Home:
 I understand that, if granted, the mobile home must be removed from the property when my hardship ceases to exist.

 (Signature)

I hereby certify that the above information is true & correct to the best of my knowledge.

Sign 
Elizabeth Ewansee (Dec. 20, 2023 10:46 AM EST)

Date Dec 20, 2023

I hereby withdraw this application.

Sign _____

Date _____

Staff Use Only

Application Date: _____

Taken by: _____

Tentative Planning Commission Date: _____

If Appealed 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) Cecelia A. Hennig
Address 241 Legacy Drive
Demorest Ga. 30535
Phone Number 770-540-2243

Name of applicant(s) DOUBLE E PROPERTIES, LLC (ELIZABETH EVANS)
Address 439 GREEN STREET
GAINESVILLE, GA 30501
Phone Number (404) 925-4045

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) Cecelia A Hennig

Personally appeared before me
CECELIA A HENNIG

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

Sondra Champe
Notary Public



12-06-2023
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: Cecilia A. Hennig

Date: 12-06-2023

Applicant's/Owner's Name (Printed): Cecilia A. Hennig, Manager

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Name of Official(s): _____

Office: _____

Dollar Amount: _____

Date of Contribution: _____

Applicant's/Owner's Signature: 
Elizabeth Evans (Dec 20, 2023 00:36 EST)

Date: Dec 20, 2023

Applicant's/Owner's Name (Printed): Elizabeth Evans