

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



**CONDITIONAL USE APPLICATION**

<b>Applicant (Name &amp; Mailing Address)</b>	<b>Property Owner (Name &amp; Mailing Address)</b>
Steven P. Gilliam, Attorney	B.H. Enterprises & Susan Strickland
P.O. Box 1098	B.H. Enterprises: 4757 River Bottom Drive Gainesville, GA 30507
Gainesville, GA 30503	Susan Strickland: 3940 Ellison Farm Road Braselton, GA 30517
Phone 770-536-3381	B.H. Enterprises: 770-654-1329
Email Address sgilliam@sgwmfirm.com	Phone Susan Strickland: 770-540-6948
Proposed Use PRD - single family residential	mab3649@gmail.com
	Email Address lmsstrickland@bellsouth.net

<b>Contact Person (Name &amp; Mailing Address)</b>	<b>Status of Applicant</b>	<b>Requested Action</b>
Cameron Henderson	<input type="checkbox"/> Owner	Permissive Use:
554 West Main Street Suite 700	<input checked="" type="checkbox"/> Option to Purchase	<input type="checkbox"/> HCPC <input checked="" type="checkbox"/> HCC
Buford, GA 30518	<input type="checkbox"/> Area Resident	Fee: \$ 1,500.00
Phone 678-978-6782	<input type="checkbox"/> Other	Receipt #: _____
Email Address cameron@atlaslanddev.com	Zoning: PRD	Check #: _____
B.H. Enterprises: 15037A000001	Acreage 30.32	
Tax Parcel Number Susan Strickland: 15037A000070		
Location Address 4616 Winder Hwy & 4610 Winder Hwy, Flowery Branch, GA 30542		

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

Sign [Signature] Date: 12/21/2023

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 [Signature] Date: 1/18/2024

**Staff Use Only**

Application Date: \_\_\_\_\_ Taken by: \_\_\_\_\_  
 Tentative Planning Commission Date: \_\_\_\_\_ Tentative County Commission Date: \_\_\_\_\_  
 County Commission District: \_\_\_\_\_