

AGENDA ITEM

Public Hearing to amend Hall County's Zoning Map as follows:

| REPORT TO: | Work Session (05/20/24) | | | | | |
|--------------------|--|---|--|--|--|--|
| REPORT TO: | Voting Mee | Voting Meeting (05/23/24) | | | | |
| ITEM NO: | 284/2024 | | | | | |
| SUBJECT: | 17.110.040.0. an administra north side of (Zoned AR-III; | 6305 Garden Lane Use Subject to County Commission Approval 17.110.040.O.Community Residences that fail to meet all requirements for an administrative occupancy permit on a 0.97± acre tract located on the north side of Garden Lane, at its intersection with Spout Springs Road Zoned AR-III; Tax Parcel 15046C000003 Proposed Use: Community residence Commission District 1 Priority Personal Care Home, LLC, applicant | | | | |
| Meetings: | | | | | | |
| Work Session Date: | 05/20/24 | Voting Meeting Date: 05/23/24 | | | | |
| Executive Summa | ry: | | | | | |
| Presenter: | | BG | | | | |

| Executive Summary: | |
|---|--------------|
| Presenter: Recommendation: Approval. | BG |
| Purpose of Request: 6305 Garden Lane Use Subject to County Commission Approval 17.110.040.O.Community Residences that fail to meet all requirements for an administrative occupancy permit on a 0.97± acre tract located on the north side of Garden Lane, at its intersection with Spout Springs Road Zoned AR-III; Tax Parcel 15046C000003 Proposed Use: Community residence Commission District 1 Priority Personal Care Home, LLC, applicant | History: |
| Facts and Issues: | Options: |
| Funding Requested | \$ 0.00 |
| Are funds within current budget? Source of Funds | Νο |
| Does the action involve a Resolution, Ordinance, Agreement, etc.? | Contract, No |
| Has it been reviewed by the County Attorney? | Yes |
| Is there a deadline for this item? | |

Approvals:

| Submit | Approve | Attorney | Administration | | | |
|--------|---------|----------|----------------|--|--|--|
| AD | BG | WLI | CR | | | |
| Clerk | | | | | | |
| JR | | | | | | |

Attachments:

Board Memo Recommendation Report Application Narrative Site Plan Maps Map of Active Personal Care Homes Department of Community Health Permit Certificate of Occupancy Environmental Health Comments GDOT Comments Public Works Comments Fire Comments Notice Sign Photo