2875 BROWNS BRIDGE ROAD, GAINESVILLE, GA, 30504 MAILING ADDRESS: PO BOX 1435, GAINESVILLE, GA 30503 t: 770-531-6809 l f: 770-531-3902



### **ZONING APPLICATION**

Applicant (Name & Mailing Address)	Property Owner (Name & Mailing Address)			
Scott Puckett,Inc.	We Flip, LLC			
3215 Thompson Mill Road	4045 Ridge Road			
Buford, GA 30519	Buford, GA 30519			
Phone 678-761-4399	Phone			
Email Address wspuckett@gmail.com	Email Address			
Proposed Use Mixed Use Development				
Contact Person (Name & Mailing Address)	Status of Applicant	Requested Action		
M. Tyler Smith- Smith, Gilliam, Williams & Miles, F	P.A. Owner	SS (-017) Existing Zoning: AR-III (-022)		
P.O. Box 1098	X Option to Purchase	Rezone to: PCD		
Gainesville, GA 30503	Area Resident	Fee:\$_1,500.00		
Phone770-536-3381	Other	Receipt #:		
Email Addresstsmith@sgwmfirm.com		Check #:		
Tax Parcel Number 08-154-000-017; 08-154-000-022	Acreage 21.22; 50.17	7		
Location Address 4435 Ridge Road, Buford (Hall Cou				
Sign Scott Puckett, CEO, Scott Puckett, Inc. Applicant must complete all information above. Failur application. The Planning Department has 15 days to application. If the application is found insufficient, and submitted. Please note that the Planning Comm	re to complete this section will r to review all applications and wi agenda date will not be set until	esult in the refusal of the ll set the dates for each the required information is		
Application Withdrawal: I hereby withdraw the application. Sign		_Date:		
Staff Use Only				
	Гакеп by:			
	Tentative County Commission Date: _			
County Commission District:				

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**AUTHORIZATION OF PROPERTY OWNERS** 

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

ľ	Note: If the applicant is the property owner, please disregard this form:			
Name of owner(s) Address	We Flip, LLC - Wayne M=Lenoy  4045 Ridge RD  Bufords, COA 30519			
Phone Number _	770-815-0419			
Name of applicant(s)	Scott Puckett Inc			
Address	3215 Thompson Mill Rd Buford GA 30519			
Phone Number	678-761-4399			
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)				
Personally appeared				
Wayne ma				
who swears that the in	nformation contained in this authorization is true and correct to the best of his/her			
Notary Public	Date Date			
	PUBLIC &			

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PLANNING AND DEVELOPMENT DEPARTMENT 2875 BROWNS BRIDGE ROAD, GAINESVILLE, GA, 30504 MAILING ADDRESS PO BOX 1435, GAINESVILLE GA 30503 1 770-531-6809 I f. 770-531-3902



## 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 a	and that: ve** I have not_	<u>"J</u> M
within the two years immediately preceding to any local government official involved in t	this date, made any cont the review or consideratio	ribution(s) aggregating \$250.00 or more on of this application.
**If you have made such contributions, you this application.	must provide the data re-	
Name of Official(s):		Office:
Dollar Amount:	no Maderini	Date: 3-5-24
Applicant's/Owner's Signature: 4000000000000000000000000000000000000	Wayne M	ELEROY
this application.  Name of Official(s):		Office:

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I hereby certify that I have read the abo	ove and that:			
	I have**	I have not	P	
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 0	Contribution:
Applicant's/Owner's Signature: <i>Wsca</i>	b Poto		Date:	4-5-2024
Applicant's/Owner's Name (Printed): _Scott Puckett, CEO, Scott Puckett, Inc.				