



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

ZONING APPLICATION

Applicant (Name & Mailing Address)

Scott Puckett, Inc.

Property Owner (Name & Mailing Address)

We Flip, LLC

3215 Thompson Mill Road

4045 Ridge Road

Buford, GA 30519

Buford, GA 30519

Phone 678-761-4399

Phone 770-815-0419

Email Address wspuckett@gmail.com

Email Address _____

Proposed Use Mixed Use Development

Contact Person (Name & Mailing Address)

M. Tyler Smith, Smith, Gilliam, Williams & Miles, P.A.

Status of Applicant

Requested Action

P.O. Box 1098

Owner

SS (-017)

Existing Zoning: AR-III(-022)

Gainesville, GA 30503-1098

Option to Purchase

Rezone to: PCD

Area Resident

Fee: \$ _____

Phone 770-536-3381

Other

Receipt #: _____

Email Address tsmith@sgwmfirm.com

Check #: _____

Tax Parcel Number 08-154-000-017; 08-154-000-022

Acreage 21.22; 50.17

Location Address 4435 Ridge Road, Buford, GA 30519

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

Sign *Scott Puckett*

Date: 8/23/2024

Scott Puckett, CEO, Scott Puckett, Inc.

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: _____



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AUTHORIZATION OF PROPERTY OWNERS

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

Name of owner(s) We Flip, LLC - Wayne McLeary
Address 4045 Ridge Rd
Burford, GA 30519
Phone Number 770-815-0419

Name of applicant(s) Scott Puckett Inc
Address 3215 Thompson Mill Rd
Burford 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.

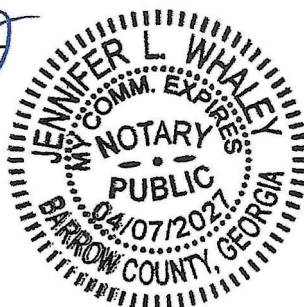
Signature of Owner(s)
Wayne McLeary

Personally appeared before me
Wayne McLeary

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

Jennifer L. Whaley
Notary Public

2-20-24
Date



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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 WM

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: Wayne McLeRoy Date: 3-5-24

Applicant's/Owner's Name (Printed): Wayne McLeRoy

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Name of Official(s): _____

Office: _____

Dollar Amount: _____

Date of Contribution: _____

Applicant's/Owner's Signature: W Scott Puckett

Date: 4-5-2024

Applicant's/Owner's Name (Printed): Scott Puckett, CEO, Scott Puckett, Inc.