

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



VARIANCE APPLICATION

Applicant (Name and Mailing Address)

AYOUB BOTRUS
5707 HOLIDAY ROAD
BUFORD GA 30518

Phone: [REDACTED]

Email Address: [REDACTED]

Property Owner (Name and Mailing Address)

AMC INVESTMENT PROPERTIES LLC
5707 HOLIDAY ROAD
BUFORD GA 30518

Phone: [REDACTED]

Email Address: [REDACTED]

Location of Property 5707 HOLIDAY RD. BUFORD GA 30518

Present Zoning L-1 Existing Structures 4,330 S.F. (IN OFFICE, MELHONS SHOP, DETAILING SPACE)

Type of Appeal:

- | | | |
|------------------------------------------------------------|-------------------------------------------------------|-------------------------|
| <input type="checkbox"/> Setback Variance | <input type="checkbox"/> Front Yard | From ___ ft to ___ ft |
| <input type="checkbox"/> Road Frontage Variance | <input type="checkbox"/> Right Side Yard | From ___ ft to ___ ft |
| <input type="checkbox"/> Sign Variance | <input type="checkbox"/> Left Side Yard | From ___ ft to ___ ft |
| <input type="checkbox"/> Hardship Mobile Home | <input type="checkbox"/> Rear Yard | From ___ ft to ___ ft |
| <input checked="" type="checkbox"/> BUFFER VARIANCE | <input type="checkbox"/> Road Frontage | From ___ ft to ___ ft |
| | <input type="checkbox"/> Sign Area | From ___ ft to ___ ft |
| | <input type="checkbox"/> Sign Height | From ___ ft to ___ ft |
| | <input type="checkbox"/> Doctor's Letter | ___ Terms Agreement |
| | <input checked="" type="checkbox"/> RIGHT SIDE | FROM 500' TO 50' |

Supporting Documents: Plat of Property Site Plan
 Deed of Property Floor Plans
 Hardship Statement Other

Fee (Must be paid for application to be complete): \$ 400.00

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 [Signature] Date 12/16/2024

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 _____

CAMPAIGN CONTRIBUTIONS DISCLOSURE FORM

2.3.2025 - Item 6

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:  _____

Date: 12/15/2024

Applicant's/Owner's Name (Printed): AYOUB BOTRUS

ARTICLES OF ORGANIZATION

Electronically Filed
 Secretary of State
 Filing Date: 4/25/2022 9:50:18 AM

BUSINESS INFORMATION

CONTROL NUMBER 22097276
BUSINESS NAME AMC Investment Properties LLC
BUSINESS TYPE Domestic Limited Liability Company
EFFECTIVE DATE 04/25/2022

PRINCIPAL OFFICE ADDRESS

ADDRESS 3087 McEver Road, Buford, GA, 30518, USA

REGISTERED AGENT

NAME	ADDRESS	COUNTY
Kari L Price	503 Fort Street, Winder, GA, 30680, USA	Barrow

ORGANIZER(S)

NAME	TITLE	ADDRESS
Ayoub Botrus	ORGANIZER	3087 McEver Road, Buford, GA, 30518, USA
Carlos Botrus	ORGANIZER	3087 McEver Road, Buford, GA, 30518, USA
Mina Botrus	ORGANIZER	3087 McEver Road, Buford, GA, 30518, USA

OPTIONAL PROVISIONS

N/A

AUTHORIZER INFORMATION

AUTHORIZER SIGNATURE Ayoub Botrus
AUTHORIZER TITLE Member