PLANNING AND ZONING DEPARTMENT
2875 BROWNS BRIDGE ROAD, GAINESVILLE, GA, 30504
MAILING ADDRESS: PO BOX 1435, GAINESVILLE, GA 30503
t: 770-531-6809 | f: 770-531-3902

HALL COUNTY
GEORGIA
We have it all in Hall

SPECIAL / CONDITIONAL USE APPLICATION

Applicant (Name & Mailing Address)

Vital Foods, LLC (Juan Carlos Lomas) c/o
Gaskins + LeCraw
1266 Powder Springs Road, Marietta, GA 30064

Phone 678.546.8100
Email Address dblumenthal@gaskinslecraw.com

Property Owner (Name & Mailing Address)

Vital Foods, LLC (Juan Carlos Lomas)
P.O. BOX 1746, Gainesville, GA 30503

Phone 770.780.4622
Email Address juancarlos.lomas@vitalfoods.us

Proposed Use Outdoor Recreation (Soccer Field)

Contact Person (Name & Mailing Address)

Dani Blumenthal, Gaskins + LeCraw
1266 Powder Springs Road, Marietta, GA 30064

Phone 678.546.8100
Email Address dblumenthal@gaskinslecraw.com

Tax Parcel Number 08013 003033
Location Address 2196 Centennial Drive

Status of Applicant

- ⌋ Owner
- ⌋ Option to Purchase
- ⌋ Area Resident
- ⌋ Other

Zoning: I-1

Requested Action

Type of Request: ☐ SU ☐ CUP
Fee:$
Receipt #:
Check #:
Acreage

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

Print Juan Carlos Lomas Date:
Sign SIGN HERE Date: 6/20/25

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:

PLANNING AND ZONING DEPARTMENT
2875 BROWNS BRIDGE ROAD, GAINESVILLE, GA, 30504
MAILING ADDRESS: PO BOX 1435, GAINESVILLE, GA 30503
t: 770-531-6809 | f: 770-531-3902

HALL COUNTY
GEORGIA
We have it all in Hall

AUTHORIZATION OF PROPERTY OWNERS

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

Name of owner(s) Vital Foods, LLC (Juan Carlos Lomas)

Address P.O. BOX 1746, Gainesville, GA 30503

Phone Number 770.780.4622

Name of applicant(s) Vital Foods, LLC (Juan Carlos Lomas) c/o Gaskins + LeCraw

Address P.O. BOX 1746, Gainesville, GA 30503

1266 Powder Springs Road, Marietta, GA 30064 (Representative)

Phone Number 770.780.4622, 678.546.8100 (Representative)

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) SIGN HERE

Personally appeared before me WITNESS

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

WITNESS

Notary Public

06/19/2025
Date

SHAIRYNIRYTH ROLLA PORSALLU VIDES
NOTARY PUBLIC
MY COMMISSION EXPIRES
02/21/2028
HALL COUNTY, GEORGIA

STATE OF GEORGIA

Secretary of State

Corporations Division
313 West Tower
2 Martin Luther King, Jr. Dr.
Atlanta, Georgia 30334-1530

Amended Annual Registration

Electronically Filed
Secretary of State
Filing Date: 4/17/2025 11:46:29 AM

BUSINESS INFORMATION

BUSINESS NAME	: Vital Foods, LLC
CONTROL NUMBER	: 15025409
BUSINESS TYPE	: Domestic Limited Liability Company
FILING TYPE	: Amended Annual Registration

CURRENT INFORMATION ON FILE FOR PRINCIPAL ADDRESS AND REGISTERED AGENT

PRINCIPAL OFFICE ADDRESS	: 909 Atlanta Hwy, Gainesville, GA, 30501, USA
REGISTERED AGENT NAME	: JUAN CARLOS LOMAS-VIITAL
REGISTERED OFFICE ADDRESS	: 3587 southers rd, Gainesville, GA, 30506, USA
REGISTERED OFFICE COUNTY	: Hall

CHANGES TO THE ABOVE CURRENT INFORMATION ARE INDICATED BELOW

PRINCIPAL OFFICE ADDRESS	: 909 Atlanta Hwy, Gainesville, GA, 30501, USA
REGISTERED AGENT NAME	: JUAN CARLOS LOMAS-VIITAL
REGISTERED OFFICE ADDRESS	: 3587 southers rd, Gainesville, GA, 30506, USA
REGISTERED OFFICE COUNTY	: Hall

AUTHORIZER INFORMATION

AUTHORIZER SIGNATURE	: Shairyniryth Porsallu
AUTHORIZER TITLE	: Authorized Person

PLANNING AND ZONING DEPARTMENT
2875 BROWNS BRIDGE ROAD, GAINESVILLE, GA, 30504
MAILING ADDRESS: PO BOX 1435, GAINESVILLE, GA 30503
t: 770-531-6809 | f: 770-531-3902

HALL COUNTY
GEORGIA
We have it all in Hall

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 X

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: _____ SIGN HERE **Date:** 6/20/25

Applicant's/Owner's Name (Printed): Juan Carlos Lomas