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

HALL COUNTY
GEORGIA
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CONDITIONAL USE APPLICATION

Applicant (Name & Mailing Address)

Karen Woodroffe
5424 Mulberry Preserve Drive
Flowery Branch GA 30542

Phone [redacted]

Email Address [redacted]

Property Owner (Name & Mailing Address)

Same as Applicant

Phone

Email Address [redacted]

Proposed Use group home for at risk youth

Contact Person (Name & Mailing Address)

Karen Woodroffe
P.O. Box 1573
Flowery Branch GA 30542

Phone [redacted]

Email Address [redacted]

Tax Parcel Number 15043F000130

Location Address 5424 Mulberry Preserve Drive

Status of Applicant

- ~~Owner~~
- ☐ Option to Purchase
- ☐ Area Resident
- ☐ Other

Zoning: R-1(c)

Acreage 0.59

Requested Action

Permissive Use:

☐ HCPC ☐ HCC

Fee:$

Receipt #:

Check #:

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

Sign [signature] Date: 8.5.25

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:

Brian P. Kemp
Governor

Candice L. Broce
Commissioner

Georgia Department of Human Services
Aging Services | Child Support Services | Family & Children Services

June 16, 2025

Woodroffe, Garfield or Karen
5424 Mulberry Preserve Dr
Flowery Branch, GA 30542-6113
Re: Partnership Parent Home at 5424 Mulberry Preserve Dr, Flowery Branch, GA 30542-6113

Dear Woodroffe, Garfield or Karen:
Your home is currently **Approved (Full) - Active** as a Partnership Parent for the Division of Family and Children Services. Your home is approved for:

Number of Children: 3
Gender and Age:
Male: 5 year(s) - 16 year(s)
Female: 5 year(s) - 16 year(s)
Approval Period: 07/01/2025 - 06/30/2027

Your **Approved (Full) - Active** status is based, in part, on your current living situation and family composition. If anyone moves into or out of your home, you must notify your Resource Development Case Manager immediately. All household members must successfully complete all required background checks and screenings in a timely manner.

Failure to adhere to this requirement can lead to the closure of your home and the removal of all children placed in your home. The placement of children into your home must comply with the above-mentioned approval requirements and must be reported to my supervisor or myself:

Case Manager: Mary B Kampovsky
Office #: (706) 329-8863
Email: Mary.Kampovsky@dhs.ga.gov

Supervisor: Julia Lawson
Office #: (706) 795-5469
Email:

We thank you for the commitment you have already shown, and look forward to our continued partnership.

Sincerely,
Mary B Kampovsky

Type letter subject here

Type date here |

Resource Development Case Manager

Rebecca Davidson

County Director/Designee

This letter is electronically signed by Approving Representative(s) of the Division of Family and Children Services.

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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 ✓

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:** 8.5.25

Applicant's/Owner's Name (Printed): Karen Woodroffe