

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



## VARIANCE APPLICATION

### Applicant (Name and Mailing Address)

Rochester | DCCM

425 Oak St.

Gainesville, GA 30501

Phone 678-450-5175

Email Address bdunckel@dccm.com

Location of Property 2632 Sardis Road, Gainesville, GA 30506

Present Zoning AR-I Existing Structures None

### Property Owner (Name and Mailing Address)

Raymond D. Schoenbaum

P.O 1349

Alpharetta, GA 30009

Phone 770-971-5660

Email Address rebecca.hughes@robbinsrealty.com

### Type of Appeal:

☐ Setback Variance

☐ Road Frontage Variance

☐ Sign Variance

☐ Hardship Mobile Home

☐ GCOD Variance

☒ Other: 100% Townhomes in M-U District

☐ Front Yard

☐ Right Side Yard

☐ Left Side Yard

☐ Rear Yard

☐ Road Frontage

☐ Sign Area

☐ Sign Height

☐ Doctor's Letter

From  ft. to  ft.

From  ft. to  ft.

From  ft. to  ft.

From  ft. to  ft.

From  ft. to  ft.

From  ft. to  ft.

From  ft. to  ft.

☐ Terms Agreement

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

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

### 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.**

Print Bradley Dunckel

Date 11/5/25

Sign Bradley Dunckel

Date 11/5/25

**I hereby withdraw this application.**

Date \_\_\_\_\_

Sign \_\_\_\_\_

### Staff Use Only

Application Date: \_\_\_\_\_ Taken by: \_\_\_\_\_

Tentative Planning Commission Date: \_\_\_\_\_ If Appealed 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) Raymond D. Schoenbaum

Address 2400 Old Milton Pkwy, # 1349  
Alpharetta, GA 30009

Phone Number \_\_\_\_\_

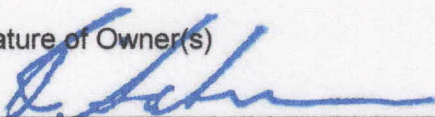
Name of applicant(s) ROCHESTER / DCCM

Address 425 OAK ST  
GAINESVILLE, GA 30501

Phone Number 770-363-1997

**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.**

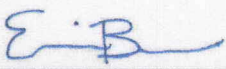
**I authorize the person named above to act as applicant in the pursuit of a rezoning, permissive use, or variance of this property.**

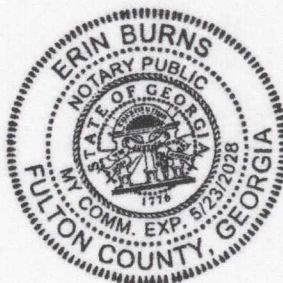
Signature of Owner(s) 

Personally appeared before me

Raymond Schoenbaum

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

  
Notary Public



10/6/25  
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 ☒ \_\_\_\_\_

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: 9/9/25

Applicant's/Owner's Name(Printed): Raymond D. Schoebaum

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Office: \_\_\_\_\_

Dollar Amount: \_\_\_\_\_

Date of Contribution: \_\_\_\_\_

Applicant's/Owner's Signature: Bradley Dunckel

Date: 9/17/25

Applicant's/Owner's Name (Printed): Bradley Dunckel