

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)

Jim Rizqallah

P. O. Box 6766

Gainesville, GA 30504

Phone [REDACTED]

Email Address jim.rizqallah@cholcefsc.com

Proposed Use light industrial- warehouse

Contact Person (Name & Mailing Address)

Wesley Robinson

Hulsey, Oliver and Mahar, LLP

P. O. Box 1457, Gainesville, GA 30503

Phone (770)532-6312

Email Address twr@homlaw.com

Tax Parcel Number 15014 000192

Location Address 3294 Athens Hwy, Gainesville, GA 30507

Property Owner (Name & Mailing Address)

Johnny Walker

3294 Athens Hwy

Gainesville, GA 30507

Phone [REDACTED]

Email Address [REDACTED]

Status of Applicant

Owner Existing Zoning: PID/AR-1

Option to Purchase Rezone to: LI

Area Resident Fee:\$

Other Receipt #:

Check #: _____

Acreage 14.11

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

Sign Jim Rizqallah Date: 10-23-2025

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) Johnny Walker

Address 3294 Athens Hwy

Gainesville, GA 30507

Phone Number [REDACTED]

Name of applicant(s) Jim Rizqallah

Address P.O. Box 6766

Gainesville, GA 30504

Phone Number [REDACTED]

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.

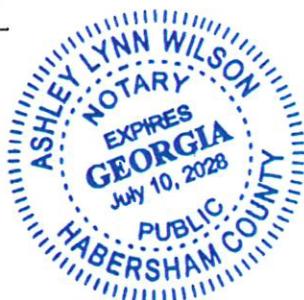
Signature of Owner(s)

Personally appeared before me

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

Ashley Lynn Wilson
Notary Public

770-654-0314
P.O. Box 346
DEMAREST, GA 30535
COMMISSION EXPIRES
JULY 10, 2028



10/24/2025
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 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: Jim Rizqallah

Date: 10-23-2025

Applicant's/Owner's Name (Printed): Jim Rizqallah

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Name of Official(s): _____

Office: _____

Dollar Amount: _____

Date of Contribution: _____

Applicant's/Owner's Signature: Johnny Walker

Date: 10-04-05

Applicant's/Owner's Name (Printed): Jim Rizqallah

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Date: 10-04-05

Applicant's/Owner's Name (Printed): Johnny Walker