

SPECIAL / CONDITIONAL USE APPLICATION

Applicant (Name & Mailing Address)

Edgar Torres, 2651 Glendale dr
 Paola G. Torres, 2651 Glendale dr.
 Gainesville, GA 30507

Property Owner (Name & Mailing Address)

Wifredo Quinteros, 4189 Holly
 Springs rd, GA 30543 (Gainesville)

Phone: [Redacted]

Phone: [Redacted]

Email Address: [Redacted]

Email Address: [Redacted]

Proposed Use: Residential Home Divide parcel into 3 lots.

Contact Person (Name & Mailing Address)

Wifredo Quinteros, 4189 Holly Springs rd
 GA, 30543.

Edgar Torres, 2651 Glendale dr. Gainesville GA 30507

Phone: 678-414-5403

Email Address: [Redacted]

Status of Applicant

Requested Action

Owner

Type of Request:

Option to Purchase

SU

CUP

Area Resident

Fee: \$ _____

Other

Receipt #: _____

Zoning: _____ Check #: _____

Tax Parcel Number: 15002 000002 Acreage: _____

Location Address: 4189 Holly Springs rd, Gainesville, GA 30543

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

Print: Edgar Torres Date: 01/11/2026

Sign: [Signature] Date: 01/11/2026

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



AUTHORIZATION OF PROPERTY OWNERS

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

Name of owner(s) Wifredo Quinteros, 4189 Holly Springs
Address rd. gillesville, GA 30543

Phone Number [REDACTED]

Name of applicant(s) Edgar Torres, P. Eliselle Torres
Address 2651 Glendale dr. Gainesville, GA 30507

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) [Handwritten Signature]

Personally appeared before me Kathy Elliott

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

[Handwritten Signature]
Notary Public

1/12/26
Date



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:

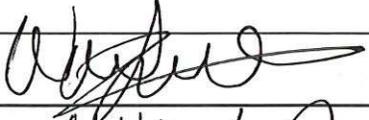
I have** I have not

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: 01-11-26

Applicant's/Owner's Name (Printed): Wilfredo Gonzalez

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Dollar Amount: _____ Date of Contribution: _____

Applicant's/Owner's Signature: [Signature] Date: 01/11/26

Applicant's/Owner's Name (Printed): Edgar Torres