

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)

Carroll Daniel Construction
330 Main St.
Gainesville, GA 30501
 Phone 770-536-3241
 Email Address ccowart@carrolldaniel.com

Property Owner (Name and Mailing Address)

Gold Creek Acquisitions IV, LLC
1155 Candler Rd.
Gainesville, GA 30507
 Phone [REDACTED]
 Email Address don.dubnik@goldcreekfoods.com

Location of Property 1161 Candler Rd, Gainesville, GA 30507
 Present Zoning I-2 Existing Structures Cold storage facility

Type of Appeal:

- | | | |
|--|--|--|
| <input type="checkbox"/> Setback Variance | <input type="checkbox"/> Front Yard | From ___ ft. to ___ ft. |
| <input type="checkbox"/> Road Frontage Variance | <input type="checkbox"/> Right Side Yard | From ___ ft. to ___ ft. |
| <input type="checkbox"/> Sign Variance | <input type="checkbox"/> Left Side Yard | From ___ ft. to ___ ft. |
| <input type="checkbox"/> Hardship Mobile Home | <input type="checkbox"/> Rear Yard | From ___ ft. to ___ ft. |
| <input type="checkbox"/> GCOD Variance | <input type="checkbox"/> Road Frontage | From ___ ft. to ___ ft. |
| <input checked="" type="checkbox"/> Other: <u>landscape & open space</u> | <input type="checkbox"/> Sign Area | From ___ ft. to ___ ft. |
| | <input type="checkbox"/> Sign Height | From ___ ft. to ___ ft. |
| | <input type="checkbox"/> Doctor's Letter | <input type="checkbox"/> 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 Don Dubnik Date 5/6/26
 Sign [Signature] Date 5/6/26

I hereby withdraw this application.

Sign _____ Date _____

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) Gold Creek Acquisitions IV, LLC

Address 1155 Candler Rd.
Gainesville, GA 30507

Phone Number [REDACTED]

Name of applicant(s) Carroll Daniel Construction

Address 330 Main St.
Gainesville, GA 30501

Phone Number 770-536-3241

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)
Don Dubinik

Personally appeared before me
Don Dubinik

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

[Signature]
Notary Public

5/6/2020
Date





June 4, 2026

To Whom It May Concern:

This will confirm that Don Dubnik, as Executive Vice President – Operations for Gold Creek, has been authorized to execute and deliver zoning code variance applications to Hall County in connection with the construction project now pending at 1155 and 1161 Candler Road, Gainesville, Georgia.

If any further information is needed, please contact the undersigned at 678-617-8356. With best regards, I remain,

Sincerely,

A handwritten signature in cursive script that reads "Robert A. Weber, Jr.".

Robert A. Weber, Jr.
General Counsel
Ga. State Bar no. 744895

cc: Michael Sheets, President of Gold Creek



STATE LICENSING BOARD FOR RESIDENTIAL AND GENERAL CONTRACTORS
 237 Coliseum Drive, Macon, GA 31217
 478-207-2440
www.sos.ga.gov/plb

Authorized Permit Agent Form (ONE FORM PER PERMIT)

This form may be used by a qualifying agent to designate an individual to obtain a permit on his/her behalf for a project for the qualifying company. The contractor should submit an original Authorized Permit Agent Form for each project for which he/she has designated an individual to pull permits. This designated individual shall further be identified as the authorized permit agent. This notarized form with an **ORIGINAL SIGNATURE (no copies or faxes accepted)**, a copy of the contractor's license, a copy of the contractor's company license, and a copy of the driver's license of the authorized permit agent is to be given to the permit office in the city or county in which the project is located. **DO NOT SEND A COPY OF THIS FORM TO THE BOARD OFFICE UNLESS REQUESTED.**

License verification by permitting office should be completed by visiting <http://verify.sos.ga.gov/verification>

Name of Qualifying Agent:	Carroll Brian Daniel
Contractor License # (Attach a copy of license.)	[REDACTED]
Name of Licensed Company:	Carroll Daniel Construction Co.
Company License # (Attach a copy of license.)	[REDACTED]
Name of Authorized Permit Agent: (Attach a copy of driver's license.)	Clayton Cowart

PROJECT (an original form is required for each project):

Company listed on contract:	Carroll Daniel Construction
Property Owner's Name:	Gold Creek Acquisitions IV, LLC
Street Address:	1161 Candler Rd.
Apartment or Suite #	
City, State, Zip:	Gainesville, GA 30507

I hereby designate the above listed Authorized Permit Agent to apply for and obtain the permit(s) for the project listed above. The undersigned, being licensed as a qualifying agent, do hereby affirm and swear, under oath, that all information on this form and on accompanying documents are true and correct.

Carroll Brian Daniel

Original Signature of Qualifying Agent (no copies or faxes accepted)

State of GA County of Hall

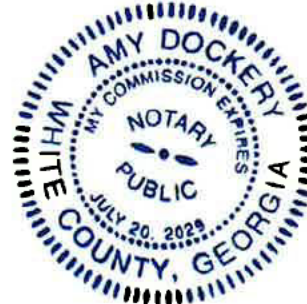
SUBSCRIBED AND SWORN BEFORE ME ON THIS THE

28th DAY OF May, 2026

Amy Dockery

NOTARY PUBLIC My Commission Expires:

NOTARY SEAL



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.

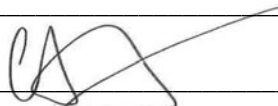
****If you have made such contributions, you must provide the data required below within ten (10) days of filing this application.**

Name of Official(s): _____

Office: _____

Dollar Amount: _____

Date of Contribution: _____

Applicant's/Owner's Signature:  _____

Date: 5/7/2026

Applicant's/Owner's Name (Printed): Carroll Daniel Construction - Clayton Cowart

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****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: Don Dubnik Date: 5/16/20

Applicant's/Owner's Name (Printed): Don Dubnik o/b/o Gold Creek Foods Acquisition IV, LLC