

ZONING APPLICATION

Applicant (Name & Mailing Address)

Hermelinda Sica de Ajanel
2109 microwave tower Rd, Gainesville
GA 30507

Phone

Email Address

Property Owner (Name & Mailing Address)

Betty Jean Martin
2109 microwave tower Rd
Gainesville GA 30507

Phone

Email Address

Proposed Use

Second dwelling, for habital purposes

Contact Person (Name & Mailing Address)

Norma Ajanel
2109 microwave tower Rd
Gainesville GA 30507

Phone

Email Address

Status of Applicant

☐ Owner

☒ Option to Purchase

☐ Area Resident

☐ Other

Requested Action

Existing Zoning: AR-1

Rezone to: R-TF

Fee: \$

Receipt #:

Check #:

Tax Parcel Number

15032000005

Acreage

1.78 acres

Location Address

2109 microwave tower Rd Gainesville GA

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

Print:

Hermelinda Sica de Ajanel

Date:

06/16/26

Sign:

Hermelinda Sica de Ajanel

Date:

06/16/26

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



VARIANCE APPLICATION

Applicant (Name and Mailing Address)

Hermelinda sica de Ajanel
2104 microwave tower Rd
Gainesville GA 30507

Phone

Email Address

Property Owner (Name and Mailing Address)

Betty Martin
2109 microwave tower Rd
Gainesville GA 30507

Phone

Email Address

Location of Property Gainesville GA Hall County

Present Zoning AR-1 Existing Structures primary structure, secondary structure
Doghouse, Chicken coop "household use"

Type of Appeal:

- ☒ Setback Variance
☐ Road Frontage Variance
☐ Sign Variance
☐ Hardship Mobile Home
☐ GCOD Variance
☐ Other: _____

- ☐ 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
☐ Deed of Property
☐ Hardship Statement

☒ Site Plan
☒ Floor Plans
☐ Other

Hardship Mobile Home:

I understand that, if granted, the mobile home must be removed from the property when my hardship ceases to exist.

(Signature)

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

I hereby certify that the above information is true & correct to the best of my knowledge.

Print Hermelinda sica de Ajanel
Sign Hermelinda sica de Ajanel

Date 07/29/26
Date 07/29/26
Date 07/29/26

I hereby withdraw this application.

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) Betty J Martin

Address 2109 microwave tower Rd
Gainesville GA

Phone Number [REDACTED]

Name of applicant(s) Hermelinda Sica de Ajanel

Address 2109 microwave tower Rd
Gainesville GA

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)

Betty J Martin, Hermelinda Sica de Ajanel

Personally appeared before me

Betty Martin, Hermelinda Sica de Ajanel

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

Vivian Froberg
Notary Public

7/29/2026
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): N/A

Office: N/A

Dollar Amount: zero

Date of Contribution: NA

Applicant's/Owner's Signature: Betty J Martin

Date: 07/29/20

Applicant's/Owner's Name (Printed): Betty Martin

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Name of Official(s): N/A Office: N/A

Dollar Amount: Zero Date of Contribution: N/A

Applicant's/Owner's Signature: Hermelinda Sica de Ajane Date: 07/15/2024

Applicant's/Owner's Name (Printed): Hermelinda Sica de Ajane