PLANNING AND ZONING DEPARTMENT
2875 BROWNS BRIDGE ROAD, GAINESVILLE, GA, 30504
MAILING ADDRESS: PO BOX 1435, GAINESVILLE. GA 30503
T: 770-531-6809 I Email: planning@hallcounty.org

HALL COUNTY
GEORGIA
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ZONING APPLICATION

Applicant (Name & Mailing Address)

Udis Calderon
2950 Salinger Way, Gainesville GA 30507

Phone 678-373-5819
Email [redacted]

Property Owner (Name & Mailing Address)

Santos Calderon & Ana Rosa Zavala Turcios
232 School Street, Gillsville GA 30543

Phone [redacted]
Email [redacted]

Contact Person (Name & Mailing Address)

Udis Calderon
2950 Salinger Way, Gainesville GA 30507

Phone 678-373-5819
Email [redacted]

Status of Applicant

- ☐ Owner
- ☐ Option to Purchase
- ☐ Area Resident
- ☑ Other: _____

Requested Action

Current Zoning: H-B
Rezone to: R-1

Property Information

Location Address(es): 1646 March Drive, Gainesville GA 30507
Tax Parcel Number(s): 15032E006034 Acreage: 0.11
Existing Use(s): Vacant lot
Proposed Use(s): SFR

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

Applicant Name Printed: Udis Calderon
Applicant Signature: _____ Date: 09/14/2026

Applicant must complete all required information above. Incomplete applications will not be accepted. The Planning Department has 15 days after application deadline to review each submittal and will assign scheduling dates during that review period. If an application is determined to be insufficient, no agenda date will be set until all required information has been provided.

Application Withdrawal: I hereby **withdraw** the application.

Applicant Signature: _____ Date: _____

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AUTHORIZATION OF PROPERTY OWNERS

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

Name of owner(s) Santos G Calderon & Ana Rosa Zavala Turcios

Address 232 School St
Gillsville, GA 30543

Phone Number [redacted]

Name of applicant(s) Udis Calderon

Address 2950 Salinger Way
Gainesville, GA 30507

Phone Number (678) 373 5899

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

Santos G Calderon & Ana Rosa Zalva Turcios

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

Notary Public

CRISTINA MOSQUEDA G
NOTARY
EXPIRES
GEORGIA
JULY 7, 2030
PUBLIC
HALL COUNTY

09/14/2026
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:** 09/14/2026

Applicant's/Owner's Name (Printed): Udis Calderon

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Dollar Amount: _____ Date of Contribution: _____

Applicant's/Owner's Signature: _____ **Date:** 09/14/2026

Applicant's/Owner's Name (Printed): Santos G. Calderon & Ana Rosa Zavala Turcios