2875 BROWNS BRIDGE ROAD, GAINESVILLE, GA, 30504 MAILING ADDRESS: PO BOX 1435, GAINESVILLE. GA 30503 t: 770-531-6809 I f: 770-531-3902



### **ZONING APPLICATION**

Applicant (Name & Mailing Address)	Property Owner (Name & Mailing Address)				
Rochester & Associates, LLC	JHME Properties, Parkway Professionals, Jeffrey L. Payne				
425 Oak St.	P.O. Box 74				
Gainesville, GA 30501	Gainesville, GA 30503				
Phone 678-316-1687	Phone_770-519-5598				
Email Address_bkrochester@rochester-assoc.com	Email Address jeff@cpgllc.net				
Proposed Use Residential Subdivision					
Contact Person (Name & Mailing Address)	Status of Applicant	Requested Action			
Brian Rochester	□ Owner	Existing Zoning: AR-III & R-1			
425 Oak St.	Option to Purchase	Rezone to: PRD			
Gainesville, GA 30501		Fee:\$ 1,500.00			
Phone_678-316-1687	√ Other	Receipt #: \$59019			
Email Address bkrochester@rochester-assoc.com		Check #: 0020504			
Tax Parcel Number <u>10100 000006/000007/000159/000108/000103</u> Location Address <u>3824/3830/3842/0/0 Price Road, Gaines</u>	_	acres			
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: 7/19/22 Tak  Tentative Planning Commission Date: 9/6/2021 Ter  County Commission District: 2		Webb 16/13/2022			

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## **AUTHORIZATION OF PROPERTY OWNERS**

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

Name of owner(s)	JHME Properties, Parkway Professionals, Jeffrey L. Payne
Address	P.O. Box 74
	Gainesville, GA 30503
Phone Number _	770-519-5598
Name of applicant(s)	Rochester & Associates, LLC
Address	425 Oak St.
	Gainesville, GA 30501
Phone Number	678-316-1687
	e owner of the property which is the subject matter of the attached applications as shown in the records of Hall County, Georgia.  In 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/	
who swears that the ir knowledge and belief.	nformation contained in this authorization is true and correct to the best of his/her
Amod Thier Notary Public	Date  T/19/22  EXPIRES  GEORGIA  10-29-2024

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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:				
l have** I hav	ve 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 other this application.	data required below within ten (10) days of filing			
Name of Official(s):	Office:			
Dollar Amount:	Date of Contribution:			
Applicant's/Owner's Signature:	Date: 7/9/22			
Applicant's/Owner's Name (Printed):				

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I hereby certify that I have read the ab	ove 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, this application.	, you must provide	e the data required b	pelow within ten (10) days of filing	
Name of Official(s): Shelly Echels IRi	ched Uiggini	Offic	e: State Sent / Commission (he	
Dollar Amount:		Date	of Contribution: 222/ 2520	
Applicant's/Owner's Signature:	9		: 7/18/22	
Applicant's/Owner's Name (Printed): JHME Properties, Parkway Professionals, Jeffrey L. Payne				