

DAWSON COUNTY VARIANCE APPLICATION

****This portion to be completed by Zoning Administrator****

VR _____ Tax Map & Parcel # (TMP): L17 189
Current Zoning: R4 Commission District #: 1
Submittal Date: _____ Time: _____ am/pm Received by: _____ (staff initials)
Fees Assessed: _____ Paid: _____
Planning Commission Meeting Date: _____

APPLICANT INFORMATION (or Authorized Representative)

Printed Name: KURT TRUMP
Address: _____
Phone: Listed _____ Email: Business _____
Unlisted _____ Personal _____
Status: Owner [] Authorized Agent [] Lessee [] Option to purchase

Notice: If applicant is other than owner, enclosed Property Owner Authorization form must be completed.

I have /have not _____ participated in a Pre-application meeting with Planning Staff.
If not, I agree /disagree _____ to schedule a meeting the week following the submittal deadline.
Meeting Date: _____ Applicant Signature: Kurt Trump

PROPERTY INFORMATION

Street Address of Property: 126 OAK GROVE RD. DAWSONVILLE, GA
Land Lot(s): L17 189 District: 1 Section: _____
Subdivision/Lot: _____ Building Permit #: _____ (if applicable)

Directions to the Property: _____

REQUESTED ACTION

A Variance is requested from the requirements of Article # _____ Section # 602 of the Land Use Resolution/Sign Ordinance/Subdivision Regulations/Other (circle one).

If other, please describe: existing home infringes upon Land Resolution section 602 c . 40ft from front of home to road closest corner being 27 ft.

Type of Variance requested:

Front Yard Side Yard Rear Yard variance of 22.51 feet to allow the structure to:

be constructed; remain a distance of 20 feet from the: ROAD

property line, road right of way, or other (explain below):

instead of the required distance of 40 required by the regulations.

Lot Size Request for a reduction in the minimum lot size from _____ to _____

Sign Variance for: HOME TO BE REMODELED AND REHABILITATED.

Home Occupation Variance to operate: _____ business

Other (explain request): _____

If there are other variance requests for this site in past, please list case # and nature of variance: _____

Variations to standards and requirements of the Regulations, with respect to open area, setbacks, yard area, lot coverage, height, and other quantitative requirements may be granted if, on the basis of the application, investigation, and other evidence submitted by the applicant, all four (4) expressly written findings below are made:

1. Describe why a strict and literal enforcement of the standards would result in a practical difficulty or unnecessary hardship: existing home has heavy sedimentation and erosion issues which require proper slab with footings to make repairs. in which current slab was heavily degraded to the point of allowing water and sediments in to the basement over and through the wall. which has been addressed and made good until we can proceed.

2. Describe the exceptional and extraordinary conditions applicable to this property which do not apply to other properties in the same district: home was built in 1944 roughly, road has been here longer than i can remember. these are conditions that existed before the statues themselves. i believe this falls under ARTICLE IX. section 901

3. Describe why granting a variance would not be detrimental to the public health, safety, morals or welfare and not be materially injurious to properties in the near vicinity: _____

the rehabilitation of this home would bring value to the district, its long over due. not to mention moral of the community and eager buyers which is an economic gain.

4. Describe why granting this variance would support the general objectives within this Resolution:

we are talking about adding 16 sqft of concrete, 24 inches x 8 foot. to meet the side of the home and restructure the front of the home and roof. Also giving us an updated floor plan and providing us with the space needed to raise our children and as stated above i believe this is good for us as is the community all the way around.

Submit clear explanation of all four questions above. You may add sheets if necessary.

(Variances should not be granted if the need arises as a result of action by the applicant or previous owner.)

PROPERTY OWNER AUTHORIZATION

I / we Kurt Trump hereby swear that I / we own the property located at (fill in address and / or tax map & parcel #):

126 Oak Grove Rd.

as shown in the tax maps and / or deed records of Dawson County, Georgia, and which parcel will be affected by this request.

I hereby authorize the person named below to act as the applicant or agent in pursuit of the variance requested on this property. I understand that any variance granted, and / or conditions placed on the property will be binding upon the property regardless of ownership. The under signer below is authorized to make this application. The under signer is aware that no application or reapplication affecting the same land shall be acted upon within 6 months from the date of the last action by the Board of Commissioners.

Printed name of applicant or agent: Kurt Trump

Signature of applicant or agent: _____ Date: _____

Printed Name of Owner(s): Kurt Trump

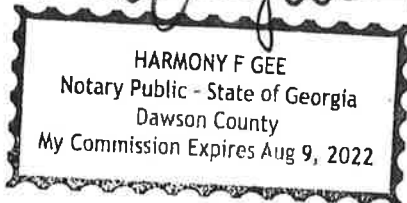
Signature of Owner(s): _____ Date _____

Sworn and subscribed before me this 22 day of July, 2021.

Harmony F GEE
Notary Public

My Commission Expires: August 9, 2022

(Seal)



(The complete names of all owners must be listed, if the owner is a partnership, the names of all partners must be listed, if a joint venture, the names of all members must be listed. If a separate sheet is needed to list all names, please identify as applicant or owner and have the additional sheet notarized also.)

VR# _____

TMP# _____

List of Adjacent Property Owners

It is the responsibility of the Applicant to provide a list of adjacent property owners. This list must include the name and address of anyone who has property touching your property or who has property directly across the street from your property.

****Please note this information should be obtained using the Tax Map and Parcel Number listing any parcel(s) adjoining or adjacent to parcel where variance or rezone is being requested.**

Name

Address

- TMP _____ 1. Byron Letchworth 181 OakGrove Rd. (L17 188 001)
- TMP _____ 2. _____
- TMP _____ 3. Timothy Bennet (L17 188)
- TMP _____ 4. _____
- TMP _____ 5. Hill of beans Holdings (L19 006)
- TMP _____ 6. _____
- TMP _____ 7. Turner K K estate (L19 004)
- TMP _____ 8. _____
- TMP _____ 9. _____
- TMP _____ 10. _____
- TMP _____ 11. _____
- TMP _____ 12. _____
- TMP _____ 13. _____
- TMP _____ 14. _____
- TMP _____ 15. _____

Use additional sheets if necessary.

APPLICANT CERTIFICATION

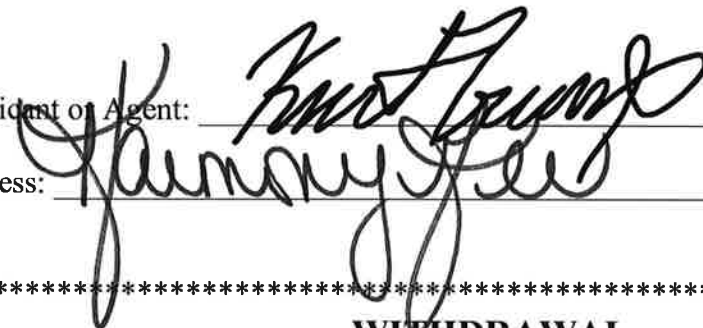
I hereby request the action contained within this application relative to the property shown on the attached plats and site plan and further request that this item be placed on both the Planning Commission and Board of Commissioners agenda(s) for a public hearing.

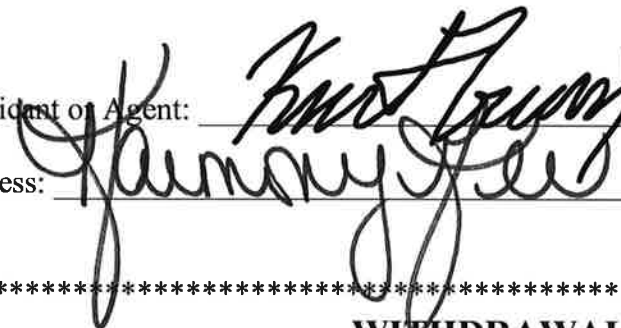
I understand that the Planning & Development staff may either accept or reject my request upon review. My request will be rejected if all the necessary data is not presented.

I understand that I have the obligation to present all data necessary and required by statute to enable the Planning Commission and Board of Commissioners to make an informed determination on my request. I will seek the advice of an attorney if I am not familiar with the zoning and land use requirements.

I understand that my request will be acted upon at the Planning Commission and Board of Commissioner hearings and that I am required to be present or to be represented by someone able to present all facts. I understand that failure to appear at a public hearing may result in the postponement or denial of my special use or rezoning application. I further understand that it is my responsibility to be aware of relevant public hearing dates and times regardless of notification from Dawson County.

I hereby certify that I have read the above and that the above information as well as the attached information is true and correct.

Signature of Applicant or Agent:  Date: 1-11-21

Signature of Witness:  Date: _____

WITHDRAWAL

Notice: This section only to be completed if application is being withdrawn.

I hereby withdraw application #: _____

Signature: _____ Date: _____

Withdrawal of Application:

Withdrawals of any application may be accommodated within the Planning & Development office if requested before the Planning Commission agenda is set. Therefore, withdrawals may not be made after ten (10) days prior to the scheduled Planning Commission meeting hearing, unless accompanied by written request stating specific reasons for withdrawal. This withdrawal request is to be published in the legal organ prior to the meeting. Following that written request and publication the Commission will vote to remove the item from the agenda at the scheduled hearing. Please note that should the withdrawal be denied, the item will receive deliberation and public hearing with a decision by the Commission. Further the applicant is encouraged to be present at the hearing to substantiate reasons for withdrawal. Please note that no refund of application fee may be made unless directed by the Board of Commissioners.

APPLICATION PROCESSING: STAFF USE ONLY

VR _____ Applicant Name: _____

Application Fee: \$ _____

IF APPLICABLE:

- Legal Advertisement Submitted to Newspaper Date: _____
- Planning Commission & Board of Commissioners Packets Delivered Date: _____
- Application Posted on County Website Date: _____
- Adjacent Property Owner Notices Mailed Date: _____
- Interdepartmental Forms Submitted for Review Date: _____
- Public Notice Signs on Property Verified Date: _____
- Approval or Denial Form placed in folder Date: _____
- Applicant Notified of Final Action Date: _____
- Approval or Denial Form to Office Manager/Building Official/Marshal Date: _____
- Planning Commission Meeting Minutes placed in folder Date: _____

Planning Commission & Board of Commissioners Actions

Planning Commission Recommendation Date: _____ Approval Approval w/stipulations Denial

If Denied by Planning Commission was decision appealed? Yes No

Board of Commissioners Decision Date: _____ Approval Approval w/stipulations Denial

-
- If appealed; Applicant Notified of Date of Appeal Hearing Date: _____
 - If appealed; Legal Advertising of Date of Appeal Hearing Date: _____
 - If appealed; Approval or Denial Form Placed in Folder Date: _____
 - Applicant Notified of Final Action of Appeal Date: _____
 - Board of Commission Meeting Minutes placed in folder Date: _____

Dawson County, Georgia Board of Commissioners

Affidavit for Issuance of a Public Benefit

As Required by the Georgia Illegal Immigration Reform and Enforcement Act of 2011

By executing this affidavit under oath, as an applicant for a Dawson County Business License, Out of County Business Registration, Alcohol License, or other public benefit as referenced in the Georgia Illegal Immigration Reform and Enforcement Act of 2011 [O.C.G.A. § 50-36-1(e)(2)], I am stating the following with respect to my application for such Dawson County public benefit.

/ I am a United States citizen.

I am a legal permanent resident of the United States. (FOR NON-CITIZENS)

I am a qualified alien or non-immigrant under the Federal Immigration and Nationality Act with an alien number issued by the Department of Homeland Security or other federal immigration agency. (FOR NON-CITIZENS)

My alien number issued by the Department of Homeland Security or other federal immigration agency is:

The undersigned applicant also hereby verifies that he or she is 18 years of age or older and has provided at least one **secure and verifiable document**, as required by O.C.G.A. § 50-36-1(e)(1), with this affidavit. (See reverse side of this affidavit for a list of secure and verifiable documents.)

The secure and verifiable document provided with this affidavit can best be classified as:

In making the above representation under oath, I understand that any person who knowingly and willfully makes a false, fictitious, or fraudulent statement or representation in an affidavit shall be guilty of a violation of O.C.G.A. § 16-10-20 and face criminal penalties as allowed by such criminal statute.

Executed in Dawsonville (city), Georgia (state)

Kurt Trump
Signature of Applicant

8.22.2021
Date

KURT TRUMP
Printed Name

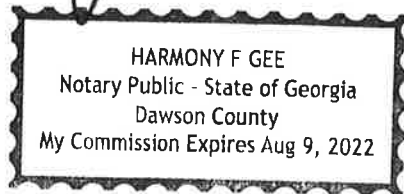
Name of Business

SUBSCRIBED AND SWORN BEFORE ME ON

THIS 22 DAY OF July , 20 21

Harmony F GEE Notary Public

My Commission Expires: August 9, 2022

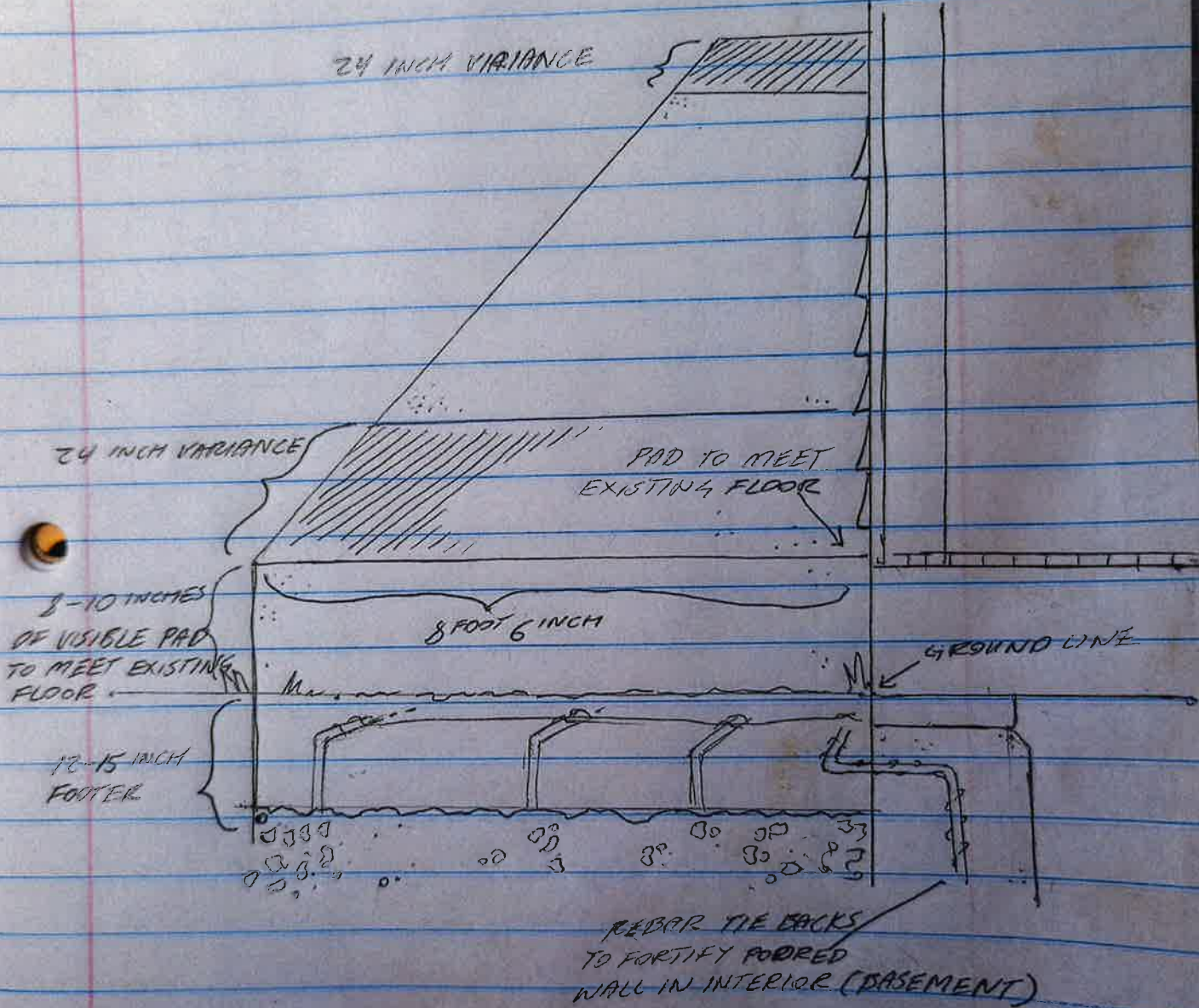


(Seal)

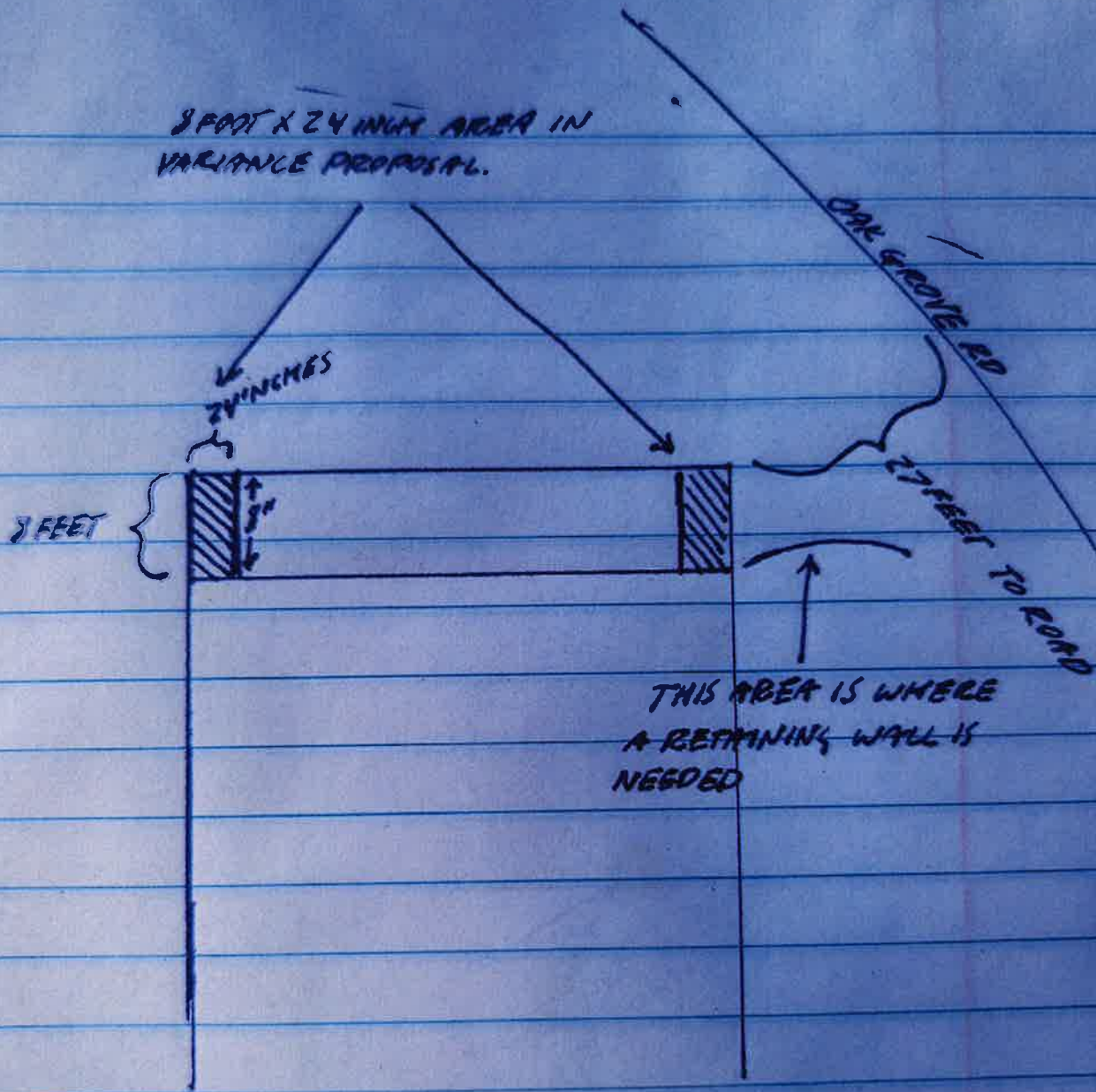
Secure and Verifiable Documents Under O.C.G.A. § 50-36-2

The following list of secure and verifiable documents, published under the authority of O.C.G.A. § 50-36-2, contains documents that are verifiable for identification purposes, and documents on this list may not necessarily be indicative of residency or immigration status.

- A **United States Passport or Passport Card** [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
- A **United States Military Identification card** [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
- A **Driver's License** issued by one of the United States, the District of Columbia, the Commonwealth of Puerto Rico, Guam, the Commonwealth of the Northern Marianas Islands, the United States Virgin Island, American Samoa, or the Swain Islands, provided that it contains a photograph of the bearer or lists sufficient identifying information regarding the bearer, such as name, date of birth, gender, height, eye color, and address to enable the identification of the bearer [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
- An **Identification Card** issued by one of the United States, the District of Columbia, the Commonwealth of Puerto Rico, Guam, the Commonwealth of the Northern Marianas Islands, the United States Virgin Island, American Samoa, or the Swain Islands, provided that it contains a photograph of the bearer or lists sufficient identifying information regarding the bearer, such as name, date of birth, gender, height, eye color, and address to enable the identification of the bearer [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
- A **Tribal Identification Card** of a federally recognized Native American tribe, provided that it contains a photograph of the bearer or lists sufficient identifying information regarding the bearer, such as name, date of birth, gender, height, eye color, and address to enable the identification of the bearer. A listing of federally recognized Native American tribes may be found at:
<http://www.bia.gov/WhoWeAre/BIA/OIS/TribalGovernmentServices/TribalDirectory/index.htm>
[O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
- A **United States Permanent Resident Card or Alien Registration Receipt Card** [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
- An **Employment Authorization Document** that contains a photograph of the bearer [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
- A **Passport Issued by a Foreign Government** [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
- A **Merchant Mariner Document or Merchant Mariner Credential** issued by the United States Coast Guard [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
- A **Free and Secure Trade (FAST) card** [O.C.G.A. § 50-36-2(b)(3); 22 CFR § 41.2]
- A **NEXUS Card** [O.C.G.A. § 50-36-2(b)(3); 22 CFR § 41.2]
- A **Secure Electronic Network for Travelers Rapid Inspection (SENTRI) card** [O.C.G.A. § 50-36-2(b)(3); 22 CFR § 41.2]
- A **Driver's License issued by a Canadian Government Authority** [O.C.G.A. § 50-36-2(b)(3); 8 CFR § 274a.2]
- A **Certificate of Citizenship** issued by the United States Department of Citizenship and Immigration Services (USCIS) (Form N-560 or Form N-561) [O.C.G.A. § 50-36-2(b)(3); 6 CFR § 37.11]
- A **Certificate of Naturalization** issued by the United States Department of Citizenship and Immigration Services USCIS) (Form N-550 or Form N-570) [O.C.G.A. § 50-36-2(b)(3); 6 CFR § 37.11]

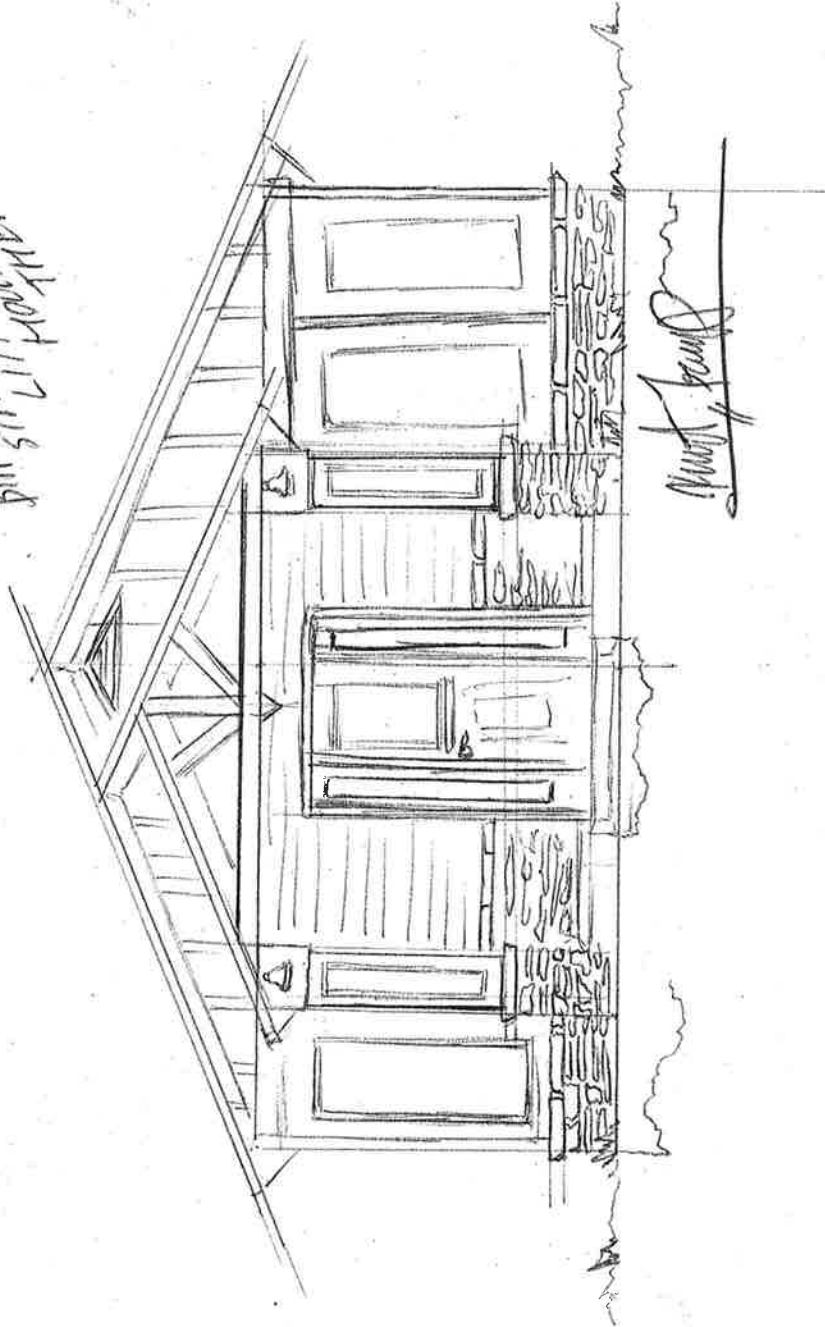


8 FOOT X 24 INCH AREA IN
VARIANCE PROPOSAL.



THIS AREA IS WHERE
A RETAINING WALL IS
NEEDED

FOR SIMPLE AND
SIMPLE HOUSE



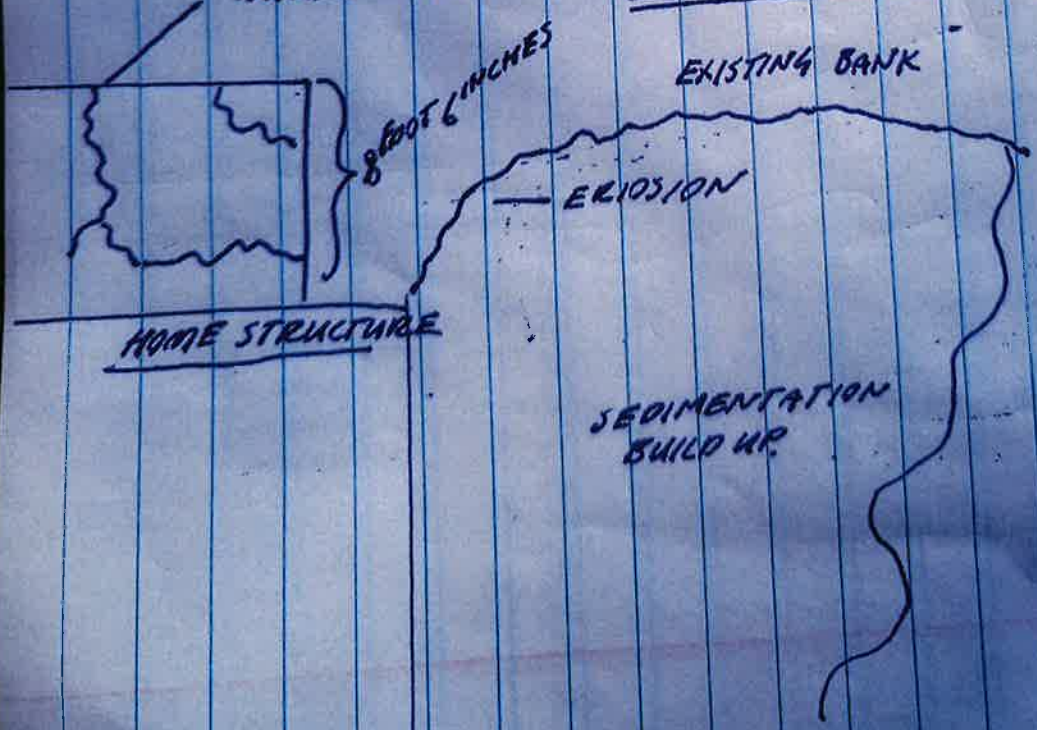
Simple House

Concept Plan

US 041-1012
0510 1112



PARCH SLAB WITH NO FOOTER
EXTREMELY ERODED ALLOWING
WATER IN BASEMENT. (HAS BEEN REMOVED FOR REPAIRATIONS)





Official Tax Receipt
Dawson County
25 Justice Way, Suite 1222
Dawsonville, GA 30534
--Online Receipt--

Phone: (706) 344-3520
Fax: (706) 344-3522

Trans No	Property ID / District Description	Original Due	Interest & Penalty	Amount Due	Amount Paid	Transaction Balance
2020 - 14218	L17 189 / 1 LL 395 446 LD 13-1 FMV: 94600	\$895.41	\$5.78 Fees: \$0.00 \$0.00	\$0.00	\$901.19	\$0.00
Totals:		\$895.41	\$5.78	\$0.00	\$901.19	\$0.00

Paid Date: 12/9/2020

Charge Amount: \$901.19

TRUMP KURT D



Scan this code with your mobile phone to view this bill

FRONT

22.51'

27.78

#126

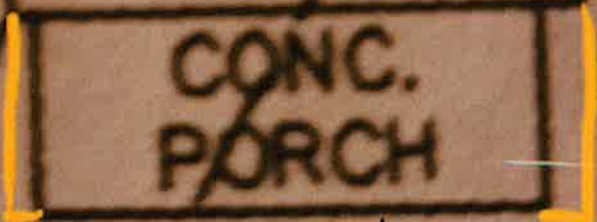
ONE STORY
HARDY BOARD
RESIDENCE
BASEMENT

CONC.
PORCH

DETERIORATING
STEPS

BRICK
SIDEWALK
COVER

IPS



**GEORGIA DEPARTMENT OF PUBLIC HEALTH
CONSTRUCTION PERMIT AND SITE APPROVAL
For On-Site Sewage Management System**

COUNTY: Dawson	SUBDIVISION:	LOT NUMBER:	BLOCK:
PROPERTY LOCATION (ADDRESS/DIRECTIONS): 126 OAK GROVE RD DAWSONVILLE, GA 30534			

I hereby apply for a construction permit to install an On-Site Sewage Management System and agree that the system will be installed to conform to the requirements of the rules of the Georgia Department of Public Health, Chapter 511-3-1. By my signature, I understand that final inspection is required and will notify the County Health Department upon completion of construction and before applying final cover material to the system.

PROPERTY OWNER'S/AUTHORIZED AGENT'S SIGNATURE:	DATE: 12/04/2020
PROPERTY OWNER'S NAME: KURT TRUMP	PHONE NUMBER: [REDACTED]
PROPERTY OWNER'S ADDRESS: [REDACTED]	ALTERNATE PHONE NUMBER:
AUTHORIZED AGENT'S NAME (IF OTHER THAN OWNER):	RELATIONSHIP TO OWNER:

Section A — General Information

1. REQUIRED SETBACK FROM RECEIVING BODIES (wells, lakes, sinkholes, streams, etc.) EVALUATED: <input checked="" type="radio"/> Yes <input type="radio"/> No	5. TYPE OF STRUCTURE (single/multi-family residence, commercial, restaurant, etc.): Single-Family Residence	9. SOIL SERIES (e.g. Pacolet, Orangeburg, etc.):
2. WATER SUPPLY: <input type="radio"/> Public <input checked="" type="radio"/> Private <input type="radio"/> Community	6. WATER USAGE BY: Bedroom Numbers	10. PERCOLATION RATE / HYDRAULIC LOADING RATE: [REDACTED] [REDACTED] [REDACTED] 4 5
3. SEWAGE SYSTEM TO BE PERMITTED: <input type="radio"/> New <input checked="" type="radio"/> Repair <input type="radio"/> Addition	7. NO. OF BEDROOMS / GPD: [REDACTED] [REDACTED] [REDACTED] 4	11. RESTRICTIVE SOIL HORIZON DEPTH (INCHES): [REDACTED] [REDACTED] 7 2
4. LOT SIZE (SQUARE FEET / ACRES): [REDACTED] [REDACTED] 1 [REDACTED] 9	8. LEVEL OF PLUMBING OUTLET: <input type="radio"/> Ground Level <input checked="" type="radio"/> Basement <input type="radio"/> Above ground level	12. SOIL TEST PERFORMED BY:

Section B — Primary / Pretreatment

1. DISPOSAL METHOD: Septic Tank	2. GARBAGE DISPOSAL: <input type="radio"/> Yes <input checked="" type="radio"/> No	3. SEPTIC TANK CAPACITY (GALLONS): 1000	4. ATU Capacity: 0	5. DOSING TANK CAPACITY (GALLONS):	6. GREASE TRAP CAPACITY (GALLONS):
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Section C — Secondary Treatment

1. ABSORPTION FIELD DESIGN: <input type="radio"/> Level Field <input checked="" type="radio"/> Serial <input type="radio"/> Drip <input type="radio"/> Bed <input type="radio"/> Distribution Box <input type="radio"/> Mound/Area Fill <input type="radio"/> Other	4. TOTAL ABSORPTION FIELD SQUARE FEET REQUIRED: [REDACTED] [REDACTED] 7 8 0	7. NUMBER OF ABSORPTION TRENCHES: [REDACTED] [REDACTED] [REDACTED] [REDACTED]
2. ABSORPTION FIELD PRODUCT: Quick 4 High Capacity -16in	5. TOTAL ABSORPTION FIELD LINEAR FEET REQUIRED: [REDACTED] [REDACTED] 2 6 0	8. SPECIFIED LENGTH OF ABSORPTION TRENCHES: [REDACTED] [REDACTED] [REDACTED] [REDACTED]
3. AGGREGATE DEPTH (Inches):	6. DEPTH OF ABSORPTION TRENCHES (range in inches): [REDACTED] 2 4 [REDACTED] 3 6	9. Distance Between Absorption Trenches: [REDACTED] [REDACTED] [REDACTED] [REDACTED]

Permit

A PERMIT IS HEREBY GRANTED TO INSTALL THE ON-SITE SEWAGE MANAGEMENT SYSTEM DESCRIBED ABOVE. THIS PERMIT IS NOT VALID UNLESS PROPERLY SIGNED BELOW. THIS PERMIT EXPIRES TWELVE (12) MONTHS FROM DATE OF ISSUANCE.

ANY GRADING, FILLING, OR OTHER LANDSCAPING SUBSEQUENT TO ISSUANCE OF A PERMIT MAY RENDER PERMIT VOID.

VOID, FAILURE TO FOLLOW SITE PLAN MAY RENDER PERMIT VOID. ANY GRADING, FILLING, OR OTHER LANDSCAPING SUBSEQUENT TO FINAL INSPECTION BY COUNTY HEALTH DEPARTMENT, WHICH ADVERSELY AFFECTS THE FUNCTION OF THE ON-SITE SEWAGE MANAGEMENT SYSTEM, MAY RENDER APPROVAL VOID. INSTALLATION CONTRACTOR IS RESPONSIBLE FOR LOCATING PROPER DISTANCES FROM BUILDINGS, WELLS, PROPERTY LINES, ETC.

ISSUANCE OF A CONSTRUCTION PERMIT FOR AN ON-SITE SEWAGE MANAGEMENT SYSTEM, AND SUBSEQUENT APPROVAL OF SAME BY REPRESENTATIVE OF THE GEORGIA DEPARTMENT OF PUBLIC HEALTH OR COUNTY BOARD OF HEALTH SHALL NOT BE CONSTRUED AS A GUARANTEE THAT SUCH SYSTEMS WILL FUNCTION SATISFACTORILY FOR A GIVEN PERIOD OF TIME; FURTHERMORE, SAID REPRESENTATIVE(S) DO NOT, BY ANY ACTION TAKEN IN EFFECTING COMPLIANCE WITH THESE RULES, ASSUME ANY LIABILITY FOR DAMAGES WHICH ARE CAUSED, OR WHICH MAY BE CAUSED, BY THE MALFUNCTION OF SUCH SYSTEM.

1. SITE APPROVED AS SPECIFIED ABOVE:

Yes No

APPROVING ENVIRONMENTALIST: 	TITLE: Environmental Health Specialist IV	DATE: 12/09/2020	CONSTRUCTION PERMIT NUMBER: [REDACTED]
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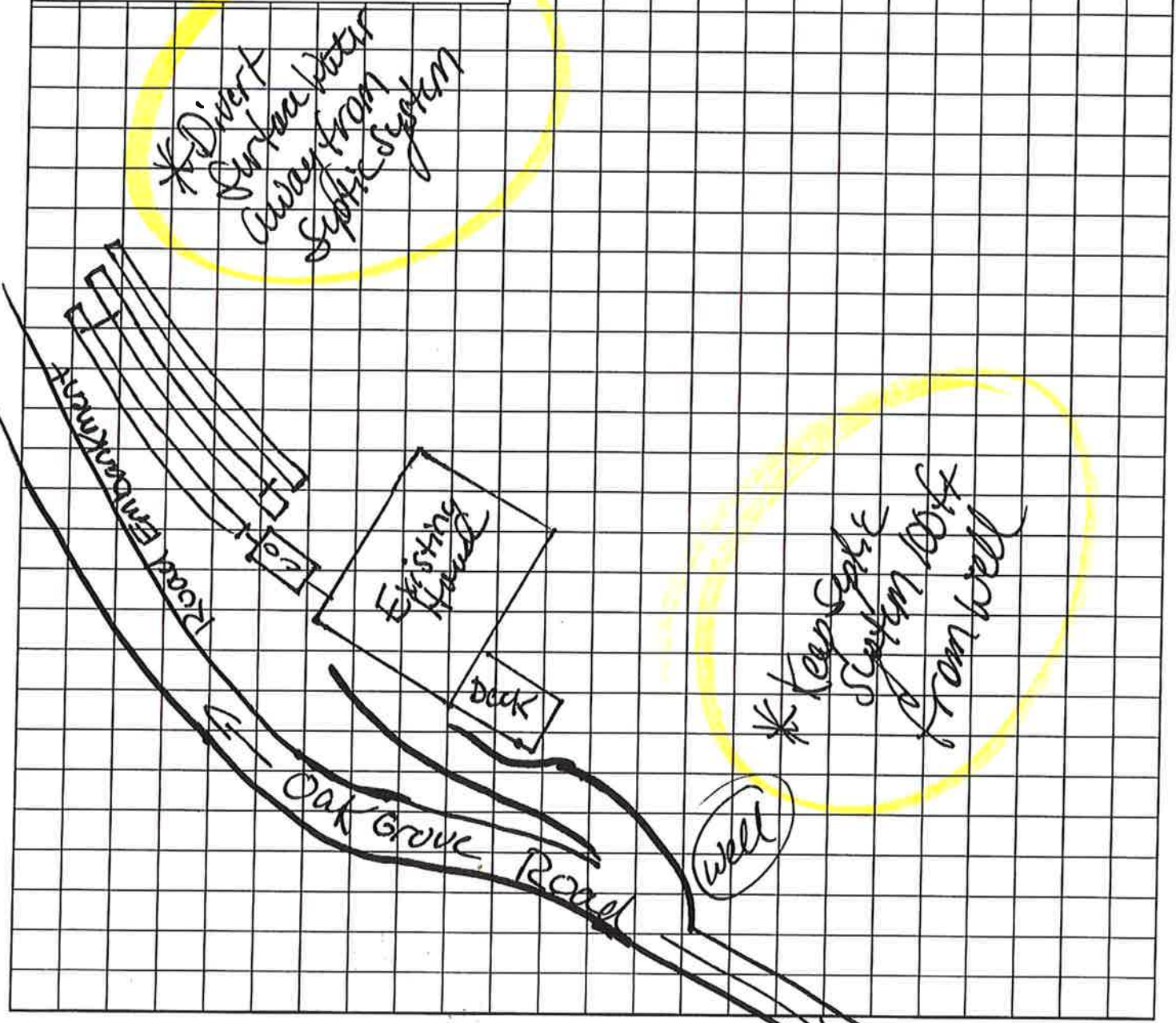
GEORGIA DEPARTMENT OF PUBLIC HEALTH
CONSTRUCTION PERMIT AND SITE APPROVAL
For On-Site Sewage Management System

County: Dawson
County Phone: (706) 265-2930
Permit Number: OSC04200942
Property Address: 126 OAK GROVE RD DAWSONVILLE, GA 30534
Property Owner: KURT TRUMP

PRESCRIBED TANK LOCATION / REMARKS:

PRESCRIBED ABSORPTION FIELD LOCATION:

Proposed System Layout/Design:



00
Superior Court



YOR'S CERTIFICATION

SECTION (G) OF O.C.G.A. SECTION 15-6-67, THIS PLAT IS A LAND SURVEY AND APPROVED BY ALL APPLICABLE RECORDING AS EVIDENCED BY APPROVAL CERTIFICATES, STATEMENTS HEREON, SUCH APPROVALS OR CONFIRMED WITH THE APPROPRIATE GOVERNMENTAL OFFICER OR USER OF THIS PLAT TO INTENDED USE OF ANY THE UNDERSIGNED LAND SURVEYOR CERTIFIES THAT THIS SURVEY MEETS THE MINIMUM TECHNICAL STANDARDS FOR PROPERTY SURVEYS AS SET FORTH IN THE RULES AND REGULATIONS OF THE BOARD OF PROFESSIONAL ENGINEERS AND LAND SURVEYORS SECTION 15-9-67

LL 395

LL 394

LL 395

LL 446

49°34'E
96'

S 88°16'13"E 112.54'

LOT 3
GEORGE R. TOWNSEND AND
WILLIE C. TOWNSEND ESTATE
N/F
K K TURNER
HOLDING, LLC
DB 1860, PG 426
PB 18, PG 3
ZONED VCR

N/F
HILL OF BEANS
HOLDING, LLC
DB 1860, PG 426
PB 18, PG 3
ZONED VCR

N/F
MEGAN ROBERTSON
DB 1194, PG 426
PB 4, PG 129
ZONED VCR

N/F
MEGAN ROBERTSON
DB 1194, PG 426
PB 4, PG 129
ZONED VCR

LOT 6
N/F
HILL OF BEANS
HOLDING, LLC
DB 1860, PG 426
PB 18, PG 3
ZONED VCR

FOUND
AR WITH CAP SET
PIPE FOUND
TOP PIPE FOUND
WAY
LINE
INC
LINE
LINE
JLC

APPROVED FOR RECORDING
Kurt D. Trump
DAWSON COUNTY, GA PLAT 117

TOTAL AREA
82,581 Sq. Ft.
1.896 Acres



PLAT REFERENCE

1. FINAL PLAT FOR GEORGE R. TOWNSEND AND WILLIE C. TOWNSEND ESTATE, BY BAKKUM-DELOACH & ASSOCIATES, DATED JULY 12, 1999 AND RECORDED IN PLAT BOOK 44, PAGE 187 IN DAWSON COUNTY COURT HOUSE. (SHOWING 8 LOTS)
2. PLAT FOR GEORGE TOWNSEND, BY HENRY BAILEY, DATED SEPTEMBER 5, 1985 AND RECORDED IN PLAT BOOK 18, PAGE 3 IN DAWSON COUNTY COURT HOUSE. (SHOWING 8.360 ACRES)
3. PLAT FOR CHARLES & GRACE SMITH, BY PATTON-PATTON & ASSOCIATES, DATED MARCH 8, 1974 AND RECORDED IN PLAT BOOK 4, PAGE 159 IN DAWSON COUNTY COURT HOUSE. (SHOWING 5.41 ACRES)

GENERAL NOTES

1. SURVEY PROCEDURES: THE FIELD DATA UPON WHICH THIS PLAT IS BASED A CLOSURE PRECISION OF ONE FOOT IN 48,087 FE WITH AN ANGULAR ERROR OF 0.5 SECOND PER AN POINT AND WAS ADJUSTED USING THE LEAST SQUARE METHOD. THIS PLAT HAS BEEN CALCULATED FOR CLOSURE AND HAS A PRECISION OF ONE FOOT IN 48,020 FEET. EQUIPMENT USED FOR ANGULAR AND LINEAR MEASUREMENTS: TOP CON OPT-9003A.
2. NO PORTION OF THIS PROPERTY IS IN A F.E.M.A. DESIGNATED FLOOD HAZARD AREA, AS PER F.I.R.M. PANEL # 13085C 0250C, DATED APRIL 4, 2018.
3. THE UTILITY PROTECTION SERVICE SHOULD BE CONTACTED AT (800) 282-7411 PRIOR TO ANY EXCAVATION FOR VERIFICATION OF ANY UNDERGROUND UTILITY LOCATIONS. UNDERGROUND UTILITIES SHOWN ARE BASED ON ABOVE GROUND EVIDENCE ONLY.
4. THE PUBLIC RECORDS REFERENCED ON THIS PLAT ONLY THOSE USED AND/OR NECESSARY FOR THE ESTABLISHMENT OF THE BOUNDARY OF THESE PLOTS THEY ARE NOT AND DO NOT CONSTITUTE A TITLE SEARCH.
5. DAWSON COUNTY TAX MAP L17, PARCEL 189.
6. DAWSON COUNTY CURRENT ZONING IS VCR. SETBACKS FOR VCR ARE AS FOLLOWS: FRONT = SIDES = REAR =

Land Son, Inc.
AND PLANNERS & SURVEYORS
CONSTRUCTION MANAGEMENT
1 PARK RD, DAWSONVILLE, GEORGIA 30534
(706) 216-8980 CELL: (706) 974-7046
265-4543 EMAIL: btrail@windstream.net

DATE	REVISIONS

BOUNDARY SURVEY
FOR
KURT D. TRUMP
LAND LOTS 395 & 446 - SOUTH HALF 13TH. DISTRICT
1ST. SECTION
DAWSON COUNTY, GEORGIA

PL
MA
SU
AP
FIELD
DR.
DRAWING
SC.

