DAWSON COUNTY VARIANCE APPLICATION

-	**This p	ortion to be complet	ed by Zoning	Administrator**	- K	
VR 20.24		Tax Map &	& Parcel # (T	MP):((3.0)	0-001	
Current Zoning:	HB	_	on District #:	1		
Submittal Date:	SKOK. RI	Time: 11.03		0	(st	aff initials)
Fees Assessed:	50-	Paid:				
Planning Commission	Meeting Date	:DICIMI	20015	0.8080		
APPLICANT INI	ORMATIC	N (or Authorized	Representati	ve)		
Printed Name:	Lloyd F	neeman				
Address:						
((3)						
Phone: Unlisted		_ E	mail:	usiness ersonal	1	yman.
Status: [] Owner	[X] Authorize	d Agent [] Lessee [] Option to pure	hase	
Notice: If applicant is	s other than ov	vner, enclosed Pro	perty Owner	Authorization fo	rm must be co	mpleted.
I have /have	not X p	articipated in a Pre	-application	meeting with Plan	ning Staff,	
If not, I agree X		_		_		adline.
Meeting Date: 12/1				//////		
			organiture.			
PROPERTY INF		 -				
Street Address of Prop	perty: 329 Daws	HARMONY ON VILLE, 64	Church 30539	Ro		
Land Lot(s): LL 140					on:	
Subdivision/Lot:			Building	g Permit #:	(if	applicable)
Directions to the Prop	erty: <u>400</u>	north to	Harnon	y Church	Rd take	RT
Proposity or	LEFT	329 Harm	vay Che	ech Ad		

REQUESTED ACTION

A Variance is requested from the requirements of Article # Resolution/Sign Ordinance/Subdivision Regulations/Other (circle or	Section #one).	of the Land Use
If other, please describe:		
Type of Variance requested:		
[] Front Yard [] Side Yard [] Rear Yard variance of <u>20</u>	feet to allow	v the structure to:
[X] be constructed; [X] remain a distance of 20 Foot fee	et from the:	
[X] property line, [] road right of way, or [] other (exp.	lain below):	
instead of the required distance of 40 Feet	requir	ed by the regulations.
[] Lot Size Request for a reduction in the minimum lot size from	to	
[] Sign Variance for:		
[] Home Occupation Variance to operate:		business
[] Other (explain request):		
If there are other variance requests for this site in past, please list ca		
Variances to standards and requirements of the Regulations, with coverage, height, and other quantitative requirements may be investigation, and other evidence submitted by the applicant, all made:	respect to open area, s granted if, on the bas	setbacks, yard area, lot sis of the application,
1. Describe why a strict and literal enforcement of the standards v unnecessary hardship:	. ,	
bandicop needs. Other existing but the resulting without the Technoton forward allows for access to the side and	Hings also Co	oving the building
Exater retention.		*

2. Describe the exceptional and extraordinary conditions applicable to this property which do not apply to other properties in the same district:
The building is for a school and needs easy access for shitests
The building is for a school and needs easy access for shirtents
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 property is an Grant Ross Forst ashich is a short road with
very little use. Other structures on the road are close
The property is an Grant Ross Food ashich is a short room with very little use. Other structures on the road are close to the road and this building will not make a negative impact.
4. Describe why granting this variance would support the general objectives within this Resolution:
The new building as proposed is for school and Church use and will benefit many members in our county.
and will benefit many members in our county.

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 hereby swear that I / we own the property located at (fill in address and / or tax map & parcel #):
329 HARMONY CHURCH ROAD
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: Lloyd FREEMAN
Signature of applicant or agent: Date: 1//10/20
Printed Name of Owner(s): LIGHTHOUSE BAPTIST CHURCH OF DAWSONVIUE INC.
Signature of Owner(s): Date 11/10/2020
Sworn and subscribed before me this \\\ \D \\ day of \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
Notary Public NOTARY
My Commission Expires: 12812021

(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.)

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. LYF LLC 3035 OAK Hampton WAF, Duluth, GA 30096
	2. Talky Panela Jores (Carelyo Roberton 7465 West Brook Rd, Gameswille, GA3
TMP	3. WIKENS ASLICY JULIAN BONNETT 160 Robins LN. PALlonega, 6A 30533
TMP	4. Wilkins Ashley Shim Pomott 160 Robins LN. Dal brogg, 64 30533
	5
TMP	6
TMP	7
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.

1101

Signature of Applicant or Agent:	Date: 11/18/12
Signature of Witness: Kaufuchan	Date: _///0/Z U
**************	*************
WITHDR	AWAL
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.

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 th	ne United States. (FOR NON-CITIZENS)
		grant under the Federal Immigration and Nationality Act with an alien of Homeland Security or other federal immigration agency. (FOR NON-
My alien n	number issued by the Department of Homel	and Security or other federal immigration agency is:
secure an		at he or she is 18 years of age or older and has provided at least one O.C.G.A. § 50-36-1(e)(1), with this affidavit. (See reverse side of this
The secure	e and verifiable document provided with t	this affidavit can best be classified as:
fictitious, and face c	or fraudulent statement or representation criminal penalties as allowed by such criminal penalties as allowe	nderstand that any person who knowingly and willfully makes a false, in an affidavit shall be guilty of a violation of O.C.G.A. § 16-10-20 inal statute. Sity),
		SUBSCRIBED AND SWORN BEFORE ME ON THIS 10th DAY OF November, 20 20 Notary Public My Commission Expires: 09-26-2021
	23	EXPIRES GEORGIA

12

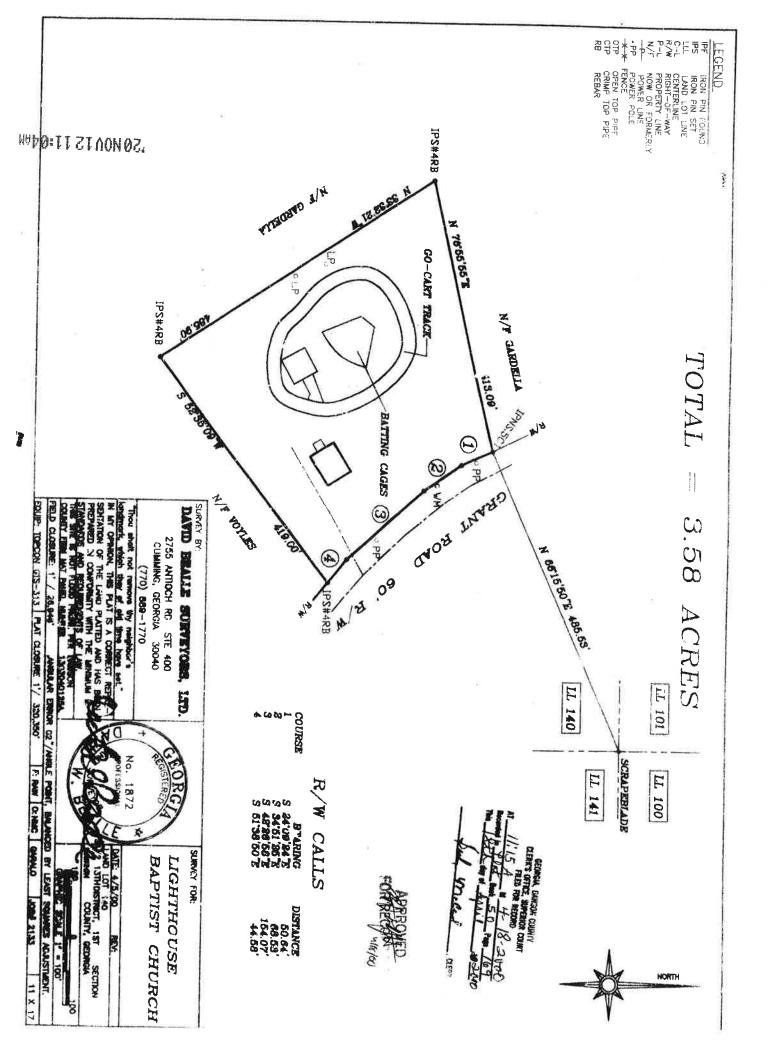
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Dawson Co	anty public benefit.	
×	I am a United States citizen.	
·	I am a legal permanent resident	of the United States. (FOR NON-CITIZENS)
) <u> </u>		mmigrant under the Federal Immigration and Nationality Act with an alienent of Homeland Security or other federal immigration agency. <i>(FOR NON-</i>
My alien nu	mber issued by the Department of Ho	omeland Security or other federal immigration agency is:
secure and	igned applicant also hereby verifies verifiable document, as required a list of secure and verifiable document	s that he or she is 18 years of age or older and has provided at least one by O.C.G.A. § 50-36-1(e)(1), with this affidavit. (See reverse side of this ats.)
		rith this affidavit can best be classified as:
<u> 64</u>	Drivors License	
fictitious, or and face crim	r fraudulent statement or representation minal penalties as allowed by such to	I understand that any person who knowingly and willfully makes a false, ation in an affidavit shall be guilty of a violation of O.C.G.A. § 16-10-20 criminal statute. (city), 66027, A (state) 1//18/20 Date
Signature of	Applicant	Date'
Printed Nam	neenan	Z.o~ Construction LLC Name of Business
		SUBSCRIBED AND SWORN BEFORE ME ON THIS DAY OF DOVEMBER, 20 20 White My Commission Expires: 926-2021
	29 NOV	My Commission Expires: VI LL LO LL LA

10 MW 12 11403AH



2020 Property Tax Statement

Nicole Stewart **Dawson County Tax Commissioner** 25 Justice Way **Suite 1222** Dawsonville, GA 30534

MAKE CHECK OR MONEY ORDER PAYABLE TO:

Dawson County Tax Commissioner

LIGHTHOUSE BAPTIST CHURCH

Tax Payer: LIGHTHOUSE BAPTIST CHURCH

Due Date

Bill No.

2020-8467

Location: 329 HARMONY CH RD

Map: 112 020 001

Dear Taxpayer,

and notify our office.

Tax Commissioner. Nicole Stewart

TOTAL DUE

.00

Printed: 11/12/2020

Map Code: 112 020 001 Description: LL 140 LD 13-S

This is your current year Ad Valorem Property Tax

Statement. This bill must be paid in full by December

1st in order to avoid interest and penalty charges. If payment is made after the due date, please call the office for the current amount due. State law requires all bills to be mailed to the owner of record as of January 1st of the tax year. If you have sold this property, please forward this bill to the NEW OWNER

Thank you for the privilege of serving you as your

Location: 329 HARMONY CH RD

Bill No: 2020-8467

District: 001 DAWSON COUNTY UNINCORPORATE

OF DAWSONVILLE INC

RETURN THIS PORTION WITH PAYMENT

(Interest will be added per month if not paid by due date)

Nicole Stewart **Dawson County Tax Commissioner**

25 Justice Way **Suite 1222**

Dawsonville, GA 30534

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

Building Value 1,448,881	Land Value 473,500	Acres 3.5800	Fair Market Value 1,922,381	Due Date	Billing Date		,	ment Through	Exemptions
	Entity	Adjust FM\	The second secon		Taxable Value	Millage Rate	Gross Tax	Credit	Net Tax
- NO TAX ACCT	S SPECIFIED -					.0000			.00
Т	OTALS					.0000	.00	.00	.00
				This gradual r	eduction and elimi	nation of the	state property tax	millage rate is t	he result of

property tax relief passed by the Governor and the House of Representatives and the Georgia State Senate

You can pay your bill in person, by mail, by phone (706-701-2576), online at www.dawsoncountytax.com, or at the drop box in front of the courthouse at the crosswalk. If Postmarked after December 1st, interest at a rate prescribed by law will be added monthly. An additional penalty as prescribed by law will be added every 120 days. If the bill is marked appealed, then this bill is only 85% of the total bill pending.

NO PAYMENT CONTRACTS WILL BE ALLOWED. \$35.00 FEE FOR RETURNED CHECKS

Current Due	0.00
Penalty	0.00
Interest	0.00
Other Fees	0.00
Previous Payments	0.00
Back taxes	0.00
TOTAL DUE	00

Printed: 11/12/2020