

SPECIAL USE PERMIT APPLICATION

AN APPLICATION TO AMEND THE OFFICIAL ZONING MAP OF GWINNETT COUNTY, GA.

APPLICANT INFORMATION	OWNER INFORMATION*
NAME: <u>Natasha Alston</u>	NAME: <u>Paul and Natasha Alston</u>
ADDRESS: <u>4246 Old Norcross Rd</u>	ADDRESS: <u>4246 Old Norcross Rd</u>
CITY: <u>Duluth</u>	CITY: <u>Duluth</u>
STATE: <u>GA</u> ZIP: <u>30096</u>	STATE: <u>Ga</u> ZIP: <u>30096</u>
PHONE: <u>678-595-4838</u>	PHONE: <u>678-595-4838</u>
CONTACT PERSON: <u>Natasha Alston</u> PHONE: <u>678-595-4838</u>	
CONTACT'S E-MAIL: <u>pnalston@hotmail.com</u>	

*Include any person having a property interest and any person having a financial interest in any business entity having property interest (use additional sheets if necessary).

APPLICANT IS THE:	
<input type="checkbox"/> OWNER'S AGENT	<input checked="" type="checkbox"/> PROPERTY OWNER
<input type="checkbox"/> CONTRACT PURCHASER	
EXISTING/PROPOSED ZONING: <u>R75</u>	BUILDING/LEASED SQUARE FEET: <u>3838</u>
LAND DISTRICT(S): <u>4p</u>	LAND LOT(S): <u>238</u> ACREAGE: <u>.77</u>
ADDRESS OF PROPERTY: <u>4246 Old Norcross Rd, Duluth, Ga 30096</u>	
SPECIAL USE REQUESTED: <u>in-home Hair Salon</u>	

PLEASE ATTACH A LETTER OF INTENT EXPLAINING WHAT IS PROPOSED

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EXHIBIT "A"

ALL THAT TRACT OR PARCEL OF LAND LYING AND BEING IN LAND LOT 238 OF THE 6TH DISTRICT, GWINNETT COUNTY, GEORGIA, BEING SHOWN AS 0.756 ACRES ON A PLAT OF SURVEY PREPARED FOR E. CAROLE TURNER BY S.R. FIELDS & SON, DATED APRIL 23, 1987, SAID PLAT BEING RECORDED AT PLAT BOOK 40, PAGE 228-A, GWINNETT COUNTY RECORDS, WHICH PLAT IS MADE A PART HEREOF BY REFERENCE AND BEING IMPROVED PROPERTY 4246 OLD NORCROSS ROAD, DULUTH, GEORGIA 30096 ACCORDING TO THE PRESENT SYSTEM OF NUMBERING PROPERTY IN GWINNETT COUNTY, GEORGIA.

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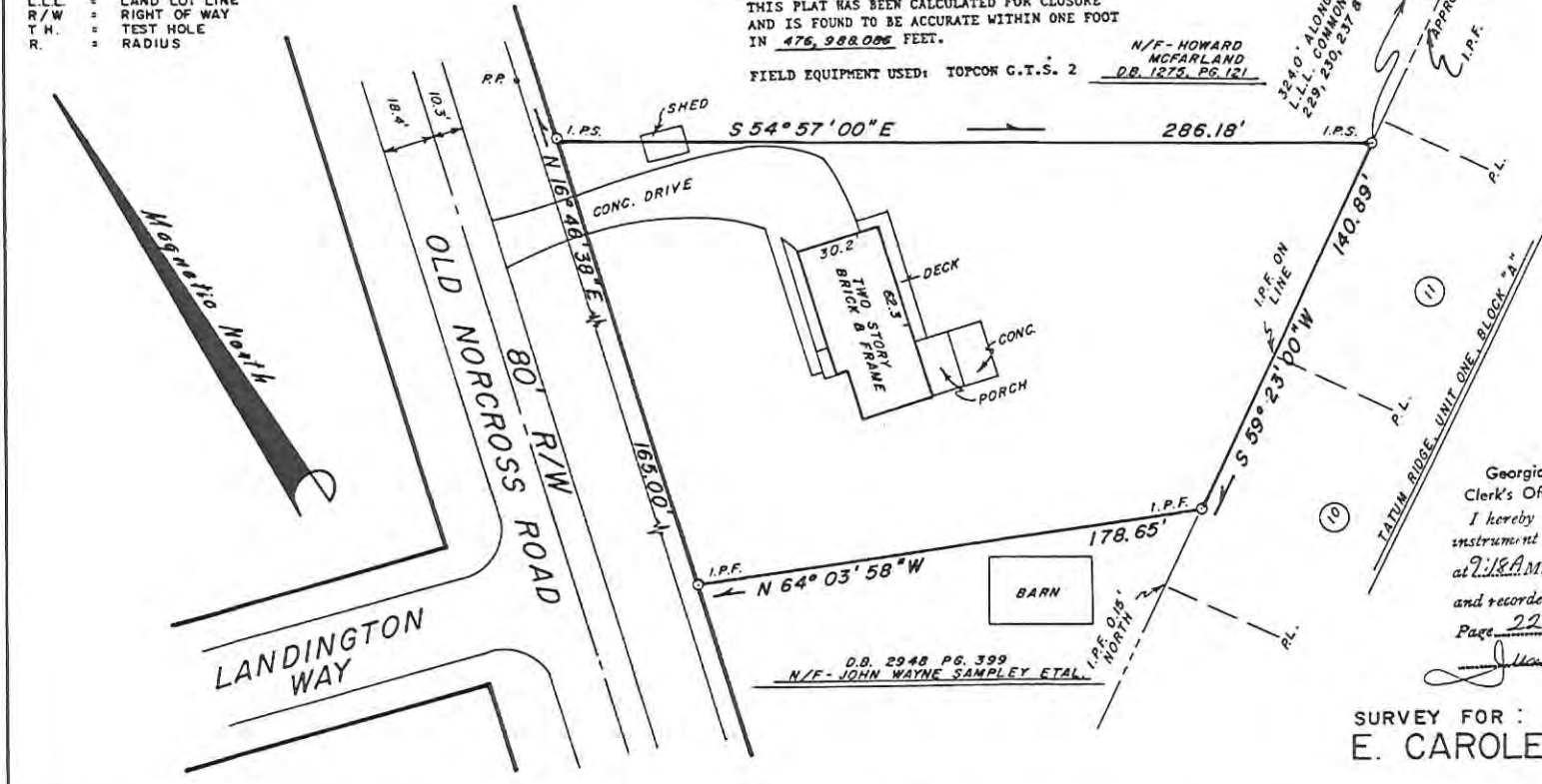
LEGEND

- I.P.S. = IRON PIN SET
- I.P.F. = IRON PIN FOUND
- P.L. = PROPERTY LINE
- C.L. = CENTER LINE
- B.L. = BUILDING LINE
- L.L.L. = LAND LOT LINE
- R/W = RIGHT OF WAY
- T.H. = TEST HOLE
- R. = RADIUS

THIS FIELD DATA UPON WHICH THIS MAP OR PLAT IS BASED HAS A CLOSURE PRECISION OF ONE FOOT IN 42801 FEET AND AN ANGULAR ERROR OF 10 SECONDS PER ANGLE POINT AND HAS BEEN ADJUSTED USING CRANDALL.

THIS PLAT HAS BEEN CALCULATED FOR CLOSURE AND IS FOUND TO BE ACCURATE WITHIN ONE FOOT IN 476,988.006 FEET.

FIELD EQUIPMENT USED: TOPCON G.T.S. 2
 N/F - HOWARD MCFARLAND D.B. 1275, PG. 121



Georgia, Gwinnett County,
 Clerk's Office — Superior Court
 I hereby certify that the within
 instrument was Filed for Record
 at 2:18 P.M. 4-29-87
 and recorded in Book 40
 Page 228-A / 4-29-87
Jan Howard Otis

SURVEY FOR:
E. CAROLE TURNER

IN MY OPINION, THIS PLAT IS A CORRECT REPRESENTATION OF THE LAND PLATTED AND HAS BEEN PREPARED IN CONFORMITY WITH THE MINIMUM STANDARDS AND REQUIREMENTS OF LAW.
S.R. Fields
 GA. R.L.S. NO. 739



S.R. FIELDS & SON
 LAND SURVEYING & ENGINEERING
 P.O. BOX 165
 485 PERRY STREET
 LAWRENCEVILLE, GA. 30246
 404 / 963-4801



LAND LOT 238
 DISTRICT 6 TH
 GWINNETT COUNTY, GEORGIA
 ACRES: 0.756
 SCALE: 1" = 40'
 DATE: 4-23-87

P.C. _____ CK' D _____ DRW DM JOB NO. _____

FILE NO. _____

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SPECIAL USE PERMIT APPLICANT'S RESPONSE
STANDARDS GOVERNING THE EXERCISE OF THE ZONING POWER

PURSUANT TO SECTION 1702 OF THE 1985 ZONING RESOLUTION, THE BOARD OF COMMISSIONERS FINDS THAT THE FOLLOWING STANDARDS ARE RELEVANT IN BALANCING THE INTEREST IN PROMOTING THE PUBLIC HEALTH, SAFETY, MORALITY OR GENERAL WELFARE AGAINST THE RIGHT TO THE UNRESTRICTED USE OF PROPERTY AND SHALL GOVERN THE EXERCISE OF THE ZONING POWER.

PLEASE RESPOND TO THE FOLLOWING STANDARDS IN THE SPACE PROVIDED OR USE AN ATTACHMENT AS NECESSARY:

- (A) WHETHER A PROPOSED SPECIAL USE PERMIT WILL PERMIT A USE THAT IS SUITABLE IN VIEW OF THE USE AND DEVELOPMENT OF ADJACENT AND NEARBY PROPERTY:
No proposed use that will affect the use or development of the adjacent or nearby property.
- (B) WHETHER A PROPOSED SPECIAL USE PERMIT WILL ADVERSELY AFFECT THE EXISTING USE OR USABILITY OF ADJACENT OR NEARBY PROPERTY:
No adverse affect use or usability of adjacent or nearby property.
- (C) WHETHER THE PROPERTY TO BE AFFECTED BY A PROPOSED SPECIAL USE PERMIT HAS REASONABLE ECONOMIC USE AS CURRENTLY ZONED:
No known affect of reasonable economic use as currently zoned.
- (D) WHETHER THE PROPOSED SPECIAL USE PERMIT WILL RESULT IN A USE WHICH WILL OR COULD CAUSE AN EXCESSIVE OR BURDENSOME USE OF EXISTING STREETS, TRANSPORTATION FACILITIES, UTILITIES, OR SCHOOLS:
No known affect of excessive or burdensome use of existing streets, transportation facilities, utilities, or schools as proposed.
- (E) WHETHER THE PROPOSED SPECIAL USE PERMIT IS IN CONFORMITY WITH THE POLICY AND INTENT OF THE LAND USE PLAN:
The proposed special use permit is in conformity with the policy and intent of the land use plan.
- (F) WHETHER THERE ARE OTHER EXISTING OR CHANGING CONDITIONS AFFECTING THE USE AND DEVELOPMENT OF THE PROPERTY WHICH GIVE SUPPORTING GROUNDS FOR EITHER APPROVAL OR DISAPPROVAL OF THE PROPOSED SPECIAL USE PERMIT:
There are no other existing or changing conditions affecting the use and development of the property which gives grounds for approval or disapproval of this permit.

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September 18, 2013

LETTER OF INTENT

Gwinnett County Planning Division
446 West Crogan Street, Suite 250, Lawrenceville, GA 30046
Attn: Board of Commissioners
Re: INTENT for in-home HAIR SALON

To whom it may concern:

I intend to use a section of my home for an in-home hair salon. The space that I am looking at already has its own exterior door point of entry and will also have a half bathroom installed once approved. I will setup and maintain the salon in accordance with state law and adherence to current State Board of Cosmetology regulations and standards of operation. This in-home salon will only have one employee with capacity for one styling station and two dryers. The proposed days and hours of operation will be Thursday 11am to 6pm, Friday 8:00pm to 5pm, & Saturday 8am to 4pm and will not create any additional traffic or increase in noise during or after normal business hours. The number of clients serviced per week will be limited between 20 and 25.

If you request any additional information, please contact me by mail. Thank you for your attention regarding this matter.

Sincerely,



Natasha Alston
4246 Old Norcross Rd. NW
Duluth, GA 30096

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SPECIAL USE PERMIT APPLICANT'S CERTIFICATION

THE UNDERSIGNED BELOW IS AUTHORIZED TO MAKE THIS APPLICATION. THE UNDERSIGNED IS AWARE THAT NO APPLICATION OR REAPPLICATION AFFECTING THE SAME LAND SHALL BE ACTED UPON WITHIN 12 MONTHS FROM THE DATE OF LAST ACTION BY THE BOARD OF COMMISSIONERS UNLESS WAIVED BY THE BOARD OF COMMISSIONERS. IN NO CASE SHALL AN APPLICATION OR REAPPLICATION BE ACTED UPON IN LESS THAN SIX (6) MONTHS FROM THE DATE OF LAST ACTION BY THE BOARD OF COMMISSIONERS.

Natasha Alston 11-22-13
Signature of Applicant Date

Natasha Alston Master Cosmetologist

Type or Print Name and Title

Ashley S. Price 11/22/13
Signature of Notary Public Date



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SPECIAL USE PERMIT PROPERTY OWNER'S CERTIFICATION

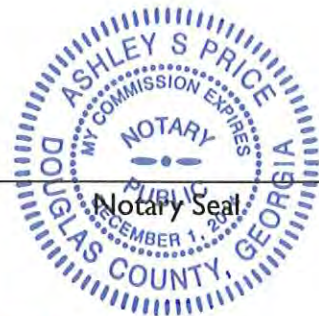
THE UNDERSIGNED BELOW, OR AS ATTACHED, IS THE OWNER OF THE PROPERTY CONSIDERED IN THIS APPLICATION. THE UNDERSIGNED IS AWARE THAT NO APPLICATION OR REAPPLICATION AFFECTING THE SAME LAND SHALL BE ACTED UPON WITHIN 12 MONTHS FROM THE DATE OF LAST ACTION BY THE BOARD OF COMMISSIONERS UNLESS WAIVED BY THE BOARD OF COMMISSIONERS. IN NO CASE SHALL AN APPLICATION OR REAPPLICATION BE ACTED UPON IN LESS THAN SIX (6) MONTHS FROM THE DATE OF LAST ACTION BY THE BOARD OF COMMISSIONERS.

Natasha Alston 11.22.13
Signature of Property Owner Date

Natasha Alston Master Cosmetologist

Type or Print Name and Title

Ashley S. Price 11/22/13
Signature of Notary Public Date



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CONFLICT OF INTEREST CERTIFICATION FOR SPECIAL USE PERMIT

The undersigned below, making application for a Special Use Permit, has complied with the Official Code of Georgia Section 36-67A-1, et. seq, Conflict of Interest in Zoning Actions, and has submitted or attached the required information on the forms provided.

Natasha Alston 11-22-13 Natasha Alston
 SIGNATURE OF APPLICANT DATE TYPE OR PRINT NAME AND TITLE

 SIGNATURE OF APPLICANT'S DATE TYPE OR PRINT NAME AND TITLE
 ATTORNEY OR REPRESENTATIVE

Ashley S. Price 11/22/13
 SIGNATURE OF NOTARY PUBLIC DATE



DISCLOSURE OF CAMPAIGN CONTRIBUTIONS

Have you, within the two years immediately preceding the filing of this application, made campaign contributions aggregating \$250.00 or more to a member of the Board of Commissioners or a member of the Gwinnett County Planning Commission?

YES NO Natasha Alston
 YOUR NAME

If the answer is yes, please complete the following section:

NAME AND OFFICAL POSITION OF GOVERNMENT OFFICIAL	CONTRIBUTIONS (List all which aggregate to \$250 or More)	DATE CONTRIBUTION WAS MADE (Within last two years)

Attach additional sheets if necessary to disclose or describe all contributions.

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**SPECIAL USE PERMIT IN A
RESIDENTIAL DISTRICT**

(Only submit with Special Use Permit Application for a use within a residence)

I, the undersigned applicant, understand and agree that the Special Use Permit, if approved, shall automatically terminate in the event that this property is sold, transferred or otherwise conveyed to any other party, or the business which operates the special use is sold, transferred, otherwise conveyed or discontinued.

Natasha Alston

Signature of Applicant

Natasha Alston

Type or Print Name

11.22.13

Date

Ashley S. Price

Signature of Notary Public

11/22/13

Date



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VERIFICATION OF CURRENT PAID PROPERTY TAXES FOR SPECIAL USE PERMIT

THE UNDERSIGNED BELOW IS AUTHORIZED TO MAKE THIS APPLICATION. THE UNDERSIGNED CERTIFIES THAT ALL GWINNETT COUNTY PROPERTY TAXES BILLED TO DATE FOR THE PARCEL LISTED BELOW HAVE BEEN PAID IN FULL TO THE TAX COMMISSIONER OF GWINNETT COUNTY, GEORGIA. IN NO CASE SHALL AN APPLICATION OR REAPPLICATION FOR REZONING BE PROCESSED WITHOUT SUCH PROPERTY VERIFICATION.

***Note: A SEPARATE VERIFICATION FORM MUST BE COMPLETED FOR EACH TAX PARCEL INCLUDED IN THE SPECIAL USE PERMIT REQUEST.**

PARCEL I.D. NUMBER: R.6 - 238 - 010
(Map Reference Number) District Land Lot Parcel

Natasha Alston 11-22-13
Signature of Applicant Date

Natasha Alston Master Cosmetologist
Type or Print Name and Title

TAX COMMISSIONERS USE ONLY

(PAYMENT OF ALL PROPERTY TAXES BILLED TO DATE FOR THE ABOVE REFERENCED PARCEL HAVE BEEN VERIFIED AS PAID CURRENT AND CONFIRMED BY THE SIGNATURE BELOW)

Rhoda Jindly Tax Services Assoc.
NAME TITLE
12/16/13
DATE

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