

SPECIAL USE PERMIT APPLICATION

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

| APPLICANT INFORMATION | PROPERTY OWNER INFORMATION* |
|--|------------------------------------|
| NAME: <u>Jim Koo Kang</u> | NAME: <u>Jim Koo Kang</u> |
| ADDRESS: <u>2310 His Way</u> | ADDRESS: <u>2310 His Way</u> |
| CITY: <u>Lawrenceville</u> | CITY: <u>Lawrenceville</u> |
| STATE: <u>GA</u> ZIP: <u>30044</u> | STATE: <u>GA</u> ZIP: <u>30044</u> |
| PHONE: <u>(770) 462-7526</u> | PHONE: <u>(770) 462-7526</u> |
| CONTACT PERSON: <u>Jim Koo Kang</u> PHONE: <u>(770) 462-7526</u> | |
| CONTACT'S E-MAIL: <u>agatopia57@gmail.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>R-140</u> | BUILDING/LEASED SQUARE FEET: <u>4100 -</u> |
| PARCEL NUMBER(S): <u>7042 034</u> | ACREAGE: <u>1.15</u> |
| ADDRESS OF PROPERTY: <u>2310 His Way, Lawrenceville, GA 30044</u> | |
| SPECIAL USE REQUESTED: <u>personal Home Care</u> | |

PLEASE ATTACH A LETTER OF INTENT EXPLAINING WHAT IS PROPOSED

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Legal Discription

ALL THAT TRACT OR PARCEL OF LAND LYING AND BEING IN LAND LOT 37 OF THE 7TH DISTRICT, GWINNETT COUNTY, GEORGIA CONTAINING 1.100 ACRES , BEING LOT 2, UNIT ONE, OF KING'S CHILDREN ESTATES, ACCORDING TO THE PLAT OF SURVEY OF MCNALLY, PATRICK, AND COLD, INC., REGISTERED LAND SURVEYORS, DATED 3/4/86, AND RECORDED IN PLAT BOOK 35, PAGE 162, GWINNETT COUNTY, GEORGIA RECORDS WHICH DESCRIPTION IS INCORPORATED HEREIN BY REFERENCE.

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

PURSUANT TO REQUIREMENT OF THE UNIFIED DEVELOPMENT ORDINANCE, 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:

_____ *yes* _____

- (B) WHETHER A PROPOSED SPECIAL USE PERMIT WILL ADVERSELY AFFECT THE EXISTING USE OR USABILITY OF ADJACENT OR NEARBY PROPERTY:

_____ *none* _____

- (C) WHETHER THE PROPERTY TO BE AFFECTED BY A PROPOSED SPECIAL USE PERMIT HAS REASONABLE ECONOMIC USE AS CURRENTLY ZONED:

_____ *yes* _____

- (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:

_____ *none* _____

- (E) WHETHER THE PROPOSED SPECIAL USE PERMIT IS IN CONFORMITY WITH THE POLICY AND INTENT OF THE LAND USE PLAN:

_____ *yes* _____

- (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:

_____ *none* _____

Letter of Intent

Name : Jin Koo Kang

Address : 2310 His way, Lawrenceville GA 30044

I wish that personal care home at top address.

Just ~~under~~ 4 senior people.

Please allow me.

Thanks

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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.

[Handwritten Signature] _____ 09/01/2016 _____
Signature of Applicant Date

Jim Koo Kang _____
Type or Print Name and Title

Vasudev G. Patel _____ 09/01/2016 _____
Signature of Notary Public Date Notary Seal



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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.

[Handwritten Signature] _____ 09/01/2016
Signature of Property Owner Date

Jin Koo Kang _____
Type or Print Name and Title

Vasudev G. Patel _____ 09/01/2016
Signature of Notary Public Date



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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.

[Handwritten Signature]
Signature of Applicant

Uri Koo Kay
Type or Print Name

sep 01, 16
Date

Vasudev G. Patel 09/01/2016
Signature of Notary Public 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:
(Map Reference Number)

7 - 42 - 34
District Land Lot Parcel

[Signature]
Signature of Applicant

Sep 01, 2016
Date

Jim Koo Kang
Type or Print Name and Title

*****PLEASE TAKE THIS FORM TO THE TAX COMMISSIONERS OFFICE AT THE GWINNETT JUSTICE AND ADMINISTRATION CENTER, 75 LANGLEY DRIVE, FOR THEIR APPROVAL BELOW.*****

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)

Debra Jirik
NAME

tax service associate
TITLE

9.1.2016
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.

Jin Koo Kang Sep 01, 2016 Jin Koo Kang
 SIGNATURE OF APPLICANT DATE TYPE OR PRINT NAME AND TITLE

Jin Koo Kang Sep 01, 16 Jin Koo Kang
 SIGNATURE OF APPLICANT'S ATTORNEY OR REPRESENTATIVE DATE TYPE OR PRINT NAME AND TITLE

Vasudev G. Patel 09/01/2016
 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 Jin Koo Kang
 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) |
|--|---|--|
| | | <u>250</u> |
| | | |
| | | |

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

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