

SPECIAL USE PERMIT APPLICATION

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

APPLICANT INFORMATION	PROPERTY OWNER INFORMATION*
NAME: <u>Vivene L.M. Holley</u>	NAME: <u>Same</u>
ADDRESS: <u>3920 Paulownia Drive</u>	ADDRESS: _____
CITY: <u>Snellville</u>	CITY: _____
STATE: <u>Ga</u> ZIP: <u>30039</u>	STATE: _____ ZIP: _____
PHONE: <u>678 580 2510</u> <u>404 434 5818</u>	PHONE: _____
CONTACT PERSON: <u>Vivene L.M. Holley</u> PHONE: <u>(678) 580 2510</u> <u>(404) 434-5818</u>	
CONTACT'S E-MAIL: <u>vholley1954@comcast.net</u> <u>youthful image 2015@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-100</u>	BUILDING/LEASED SQUARE FEET: <u>2021 sq ft</u>
PARCEL NUMBER(S): <u>R 6047 382</u>	ACREAGE: <u>.385700</u>
ADDRESS OF PROPERTY: <u>3920 Paulownia Drive</u>	
SPECIAL USE REQUESTED: <u>Space (office) for completing Esthetician Services</u>	

PLEASE ATTACH A LETTER OF INTENT EXPLAINING WHAT IS PROPOSED

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27542
8259

Legal Description

BK 27542 P60259

FILED & RECORDED
CLERK SUPERIOR COURT
GWINNETT COUNTY, GA

02 MAY 31 PM 2:00

TOM LAWLER, CLERK

GWINNETT CO. GEORGIA
REAL ESTATE TRANSFER TAX

\$ 14250
TOM LAWLER CLERK OF
SUPERIOR COURT

#H02-1088

STATE OF GEORGIA
DEKALB COUNTY

RETURN THIS INSTRUMENT TO:
David Markowitz, P.C., Attorney At Law
1800 Century Blvd/Suite 950
Atlanta, Georgia 30345

WARRANTY DEED

THIS INDENTURE, made May 29, 2002, between Jeffery H. Garvin and Sandra L. Garvin, of the County of Gwinnett in the State of Georgia, as party or parties of the first part, hereinafter called Grantor, and Vivene L.M. Holley, of the County of Gwinnett in the State of Georgia as party or parties of the second part, hereinafter called Grantee (the words "Grantor" and "Grantee" to include their respective heirs, successors and assigns where the context requires or permits).

WITNESSETH: That Grantor for and in consideration of the sum of TEN AND NO/100 DOLLARS (\$10.00) AND OTHER GOOD AND VALUABLE CONSIDERATION, in hand paid at and before the sealing and delivery of these presents, the receipt whereof is hereby acknowledged, has granted, bargained, sold, aliened, conveyed and confirmed, and by these presents does hereby grant, bargain, sell, alien, convey and confirm unto the said Grantee, the following described real property:

ALL THAT TRACT OR PARCEL OF LAND lying and being in Land Lot 47, 8th District, Gwinnett County, Georgia, being Lot 22, Block A, Unit One, Springridge Subdivision, according to plat of survey recorded in Plat Book 59, Page 226, Gwinnett County, Georgia Records, which plat and the record thereof are incorporated herein by reference thereto.

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THIS CONVEYANCE is made subject to all zoning ordinances, easements and restriction of record affecting said described property.

TO HAVE AND TO HOLD the said described property, with all and singular the rights, members appurtenances thereof, to the same being, belonging, or in anywise appertaining, to the only proper use, benefit and behoof of the said Grantee forever, in FEE SIMPLE.

AND THE SAID Grantor, and his heirs, executors, and administrators, will warrant and forever defend the right and title to the said described property unto the said Grantee against the lawful claims of all persons whomsoever.

IN WITNESS WHEREOF, the Grantor has signed and sealed this deed, the day and year above written.

Signed, sealed and delivered in the presence of:

Witness

NOTARY PUBLIC:
My commission expires:



[Signature] (Seal)
Jeffery H. Garvin

[Signature] (Seal)
Sandra L. Garvin

097298 -99

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:

No

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

No

- (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:

No

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

No

- (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:

No

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**LETTER OF INTENT
APPLICATION FOR VARIANCE BY YOUTHFUL IMAGE, LLC.**

June 29, 2017

Department of Planning & Development

Planning Division

446 West Crogan Street, Suite 250

Lawrenceville, Georgia 30046

This letter is written to provide an explicit typewritten statement as to the nature and intent of the special use permit that is being requested by Youthful Image, LLC which is located at 3920 Paulownia Drive, Snellville, GA 30039. The room is located on the ground level, next to the garage. The hours of operation would be from 10:00 am -5:00 pm, Tuesday –Saturday. All clients will be seen by advanced appointment only. I will see a maximum of three clients per day. Since a procedure lasts approximately 1.5 hours, clients will be scheduled at least 1 hour apart. There will not be any overlap of appointments.

My driveway has space for three vehicles. Since I will not have more than one client at a time, there will not be any impact on parking in the neighborhood. Any deliveries of supplies will be taken at the garage door. There is a doorbell installed at the garage door. All clients would enter the garage door entrance, after using the doorbell on the outside of the garage.

Youthful Image, LLC. is both the owner and applicant. Vivene Holley will represent Youthful Image, LLC. for all purposes relative to this special use application with authority to execute documents relative to the variance as she may deem necessary or appropriate.

PURPOSE OF THE REQUEST:

The room is to be used as a treatment room for facials and make-up application. Since there is one treatment room and one esthetician (myself), there can only be one client at a time by appointment only.

In 2015, I, Vivene Holley was diagnosed with breast cancer. After a year of treatment, I felt it was in the best interest of my health to retire from teaching and pursue another means of acquiring income to supplement my retirement pension. I have limited mobility, which makes it difficult to perform in a normal work environment. I became a licensed Esthetician and would like to be able to work from home using the room that connects to the garage on the ground level of my home.

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Since I have recurring back pain as a result of the necessary medication, I would limit the number of clients to three per day.

Special Zoning Request:

Since my home is zoned for residential only, I would like to be able to operate a small business from home.

Youthful Image, LLC

By: 

Vivene Holley, President

Youthful Image, LLC

3920 Paulownia Drive

Snellville, GA 30030

(404) 434-5818

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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.

Vivene L.M. Holley

Signature of Applicant

7/3/17

Date

Vivene L.M. Holley

Type or Print Name and Title

Owner

[Signature]

Signature of Notary Public

09/03/2017

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.

Vivene L.M. Holley

Signature of Property Owner

7/3/17

Date

Vivene L.M. Holley

Type or Print Name and Title

Owner

[Signature]

Signature of Notary Public

07/03/2017

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.

Vivene L.M. Holley

Signature of Applicant

Vivene L.M. Holley

Type or Print Name

July 3, 2017

Date

[Handwritten Signature]

Signature of Notary Public

07/03/2017

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.

Vivene L.M. Holley 7/3/17 Vivene L.M. Holley Owner
 SIGNATURE OF APPLICANT DATE TYPE OR PRINT NAME AND TITLE

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

[Signature] 07/03/2017
 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 Vivene L.M. Holley
 YOUR NAME

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

NAME AND OFFICIAL 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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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 - 6047 - 382
(Map Reference Number) District Land Lot Parcel

Vivene L.M. Holley L.E. June 14, 2017
Signature of Applicant Date
Vivene L.M. Holley L.E.
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)

J. Hayes TSA II
NAME TITLE
6-14-17
DATE

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