

**SPECIAL USE PERMIT APPLICATION**

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

APPLICANT INFORMATION	PROPERTY OWNER INFORMATION*
NAME: <u>Marisol C. Angelini</u>	NAME: <u>Marisol C. Angelini - See attachments</u>
ADDRESS: <u>2140 Muscovy Court</u>	ADDRESS: <u>582 Rockbridge Road</u>
CITY: <u>Lawrenceville</u>	CITY: <u>Lilburn</u>
STATE: <u>Georgia</u> ZIP: <u>30044</u>	STATE: <u>Georgia</u> ZIP: <u>30047</u>
PHONE: <u>404-345-8172</u>	PHONE: <u>404-345-8172</u>
CONTACT PERSON: <u>Marisol C. Angelini</u> PHONE: <u>404-345-8172</u>	
CONTACT'S E-MAIL: <u>marisolangelini@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>O&amp;I - R100</u> BUILDING/LEASED SQUARE FEET: <u>1,415 sq ft</u>	
PARCEL NUMBER(S): <u>R6-114015</u> ACREAGE: <u>1.181 acres</u>	
ADDRESS OF PROPERTY: <u>582 Rockbridge Road, Lilburn, Georgia 30047</u>	
SPECIAL USE REQUESTED: <u>For Personal Care Home</u>	

**PLEASE ATTACH A LETTER OF INTENT EXPLAINING WHAT IS PROPOSED**

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Return Recorded Document to:  
Ohlson & Medlock, LLC  
6335 Amherst Court  
Peachtree Corners, GA 30092  
OM18.672

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**LIMITED WARRANTY DEED**

STATE OF GEORGIA  
COUNTY OF GWINNETT

THIS INDENTURE, made the 2nd day of May, 2018, between

**John W. Hickinbotham and Jacqueline J. Hickinbotham,**

party of the first part, and

**Marisol C. Angelini and Martha Elena Chacon and Zoilamar Chacon,  
as Joint Tenants with Right of Survivorship**

party of the second part.

WITNESSETH That: the said party of the first part, for and in consideration of the sum of **TEN AND 00/100 DOLLARS (\$10.00)** and other goods and valuable considerations in hand paid, at and before the sealing and delivery of these presents, the receipt of which is hereby acknowledged, has granted, bargained, sold and conveyed, and by these presents does grant, bargain, sell and convey unto the said party of the second part, his heirs and assigns, all that tract or parcel of land

**ALL THAT TRACT OR PARCEL OF LAND LYING AND BEING IN LAND LOT 114 OF THE 6TH DISTRICT OF GWINNETT COUNTY, GEORGIA AND BEING LOT 14, SURVEY FOR C. B. WHITMIRE AS PER PLAT RECORDED IN PLAT BOOK 4, PAGE 296-B OF THE GWINNETT COUNTY, GEORGIA, RECORDS, AND BEING KNOWN AS 582 ROCKBRIDGE ROAD, LILBURN, GA 30247.**

**LESS AND EXCEPT THE PROPERTY CONVEYED TO GWINNETT BY VIRTUE OF THE FOLLOWING RIGHT-OF-WAY DEEDS (A) DATED NOVEMBER 9, 1988, AND RECORDED IN DEED BOOK 5200, PAGE 44; (B) DATED DECEMBER 21, 1988, AND RECORDED IN DEED BOOK 5255, PAGE 85; (C) DATED APRIL 17, 1990, AND RECORDED IN DEED BOOK 5990, PAGE 214, AND (D) DATED OCTOBER 31, 1994, AND RECORDED IN DEED BOOK 10865, PAGE 26, ALL GWINNETT COUNTY, GEORGIA RECORDS**

**TO HAVE AND TO HOLD** the said tract or parcel of land, with all and singular the rights, members and appurtenances thereof, to the same being, belonging, or in anywise appertaining, to the only proper use, benefit and behoof of the said party of the second part, his heirs and assigns, forever, in FEE SIMPLE.

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**LRS**  
**LRS Surveying, LLC**  
 29 MAPLE RIDGE DR., STE 104  
 CARTERSVILLE, GA. 30121  
 Tel: (770) 235-3610  
 email: L.Shelton@LRSsurveying.com  
 LSF001008

Client  
 Marisol Angelini

REVISIONS		
No	Revision	Date
1		
2		

© Copyright 2018 LRS Surveying  
 This survey is the property of LRS Surveying and is loaned to the client named herein.

Boundary Survey of  
 582 Rockbridge Road  
 Liburn, Georgia 30047  
 Tax Parcel  
 R 6114 015

Land Lot 114  
 6th District  
 Gwinnett County, Georgia

Date:	05/21/18
Scale:	1" = 60'
Surveyed By:	A.S./R.B.
Drawn By:	L.R.S.
Checked By:	L.R.S.
Project No.:	18-055
DWG. No.:	18-055
FBK. No.:	na

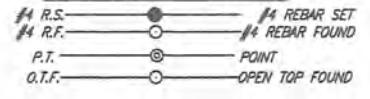
**LINE TYPES**



**ABBREVIATIONS**

DB	DEED BOOK	P/L	PROPERTY LINE
PG.	PAGE	PB	PLAT BOOK
R/W	RIGHT OF WAY	N/F	NOW OR FORMERLY

**PROPERTY CORNERS**



**SYMBOLS**



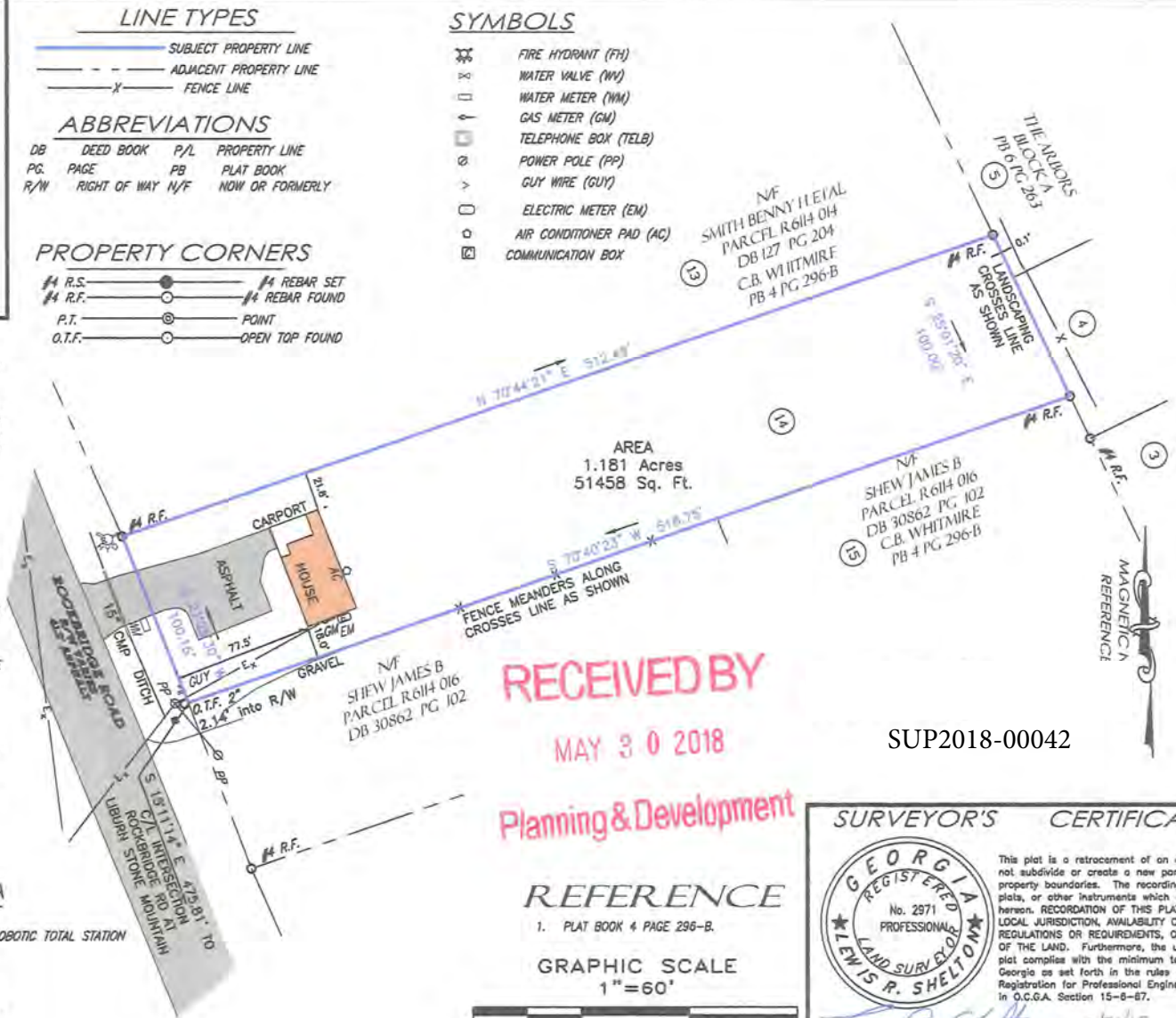
RESERVED FOR THE CLERK OF THE SUPERIOR COURTS

**NOTES**

1. THE UTILITIES SHOWN HEREDON HAVE BEEN LOCATED FROM ABOVE GROUND, VISIBLE EVIDENCE. THE SURVEYOR MAKES NO GUARANTEE THAT THE UTILITIES SHOWN COMPRISE ALL SUCH UTILITIES IN THE AREA, EITHER IN SERVICE OR ABANDONED. THE SURVEYOR FURTHER DOES NOT WARRANT THAT THE UNDERGROUND UTILITIES SHOWN ARE IN THE EXACT LOCATION INDICATED ALTHOUGH HE DOES CERTIFY THAT THEY ARE LOCATED AS ACCURATELY AS POSSIBLE FROM INFORMATION AVAILABLE. THE SURVEYOR HAS NOT PHYSICALLY LOCATED THE UNDERGROUND UTILITIES.
2. THIS PROPERTY MAY BE SUBJECT TO EASEMENTS, RESERVATIONS, RIGHTS OF WAY OR RESTRICTIONS WHICH ARE NOT RECORDED OR WOULD BE DISCLOSED BY AN ACCURATE AND CURRENT TITLE SEARCH, OR OTHERWISE KNOWN TO THE SURVEYOR; THEREFORE EXCEPTION IS TAKEN TO ANY SUCH ITEMS.
3. THE PURPOSE OF THIS SURVEY IS TO RETRACE THE PROPERTY DESCRIBED IN DEED BOOK 48868 PAGE 81 GWINNETT COUNTY RECORDS.
4. BASED ON MAPS PREPARED BY THE FEDERAL EMERGENCY MANAGEMENT AGENCY (FEMA) AVAILABLE ONLINE AT [WWW.MSC.FEMA.GOV](http://WWW.MSC.FEMA.GOV), AND BY GRAPHIC PLOTTING ONLY; NO PORTIONS OF THIS PROPERTY ARE LOCATED WITHIN FLOOD HAZARD AREA AS PER FEMA FLOOD INSURANCE RATE MAP OF GWINNETT COUNTY, GEORGIA AS SHOWN ON COMMUNITY PANEL NO. 13135C0125F DATED 09/29/2006.

**TECHNICAL DATA**

DATE OF FIELD SURVEY:	03-22-05
EQUIPMENT USED:	CARLSON CR5 ROBOTIC TOTAL STATION
APPROXIMATE ERROR:	3" PER POINT
	1 in 12,444
TYPE OF ADJUSTMENT:	LEAST SQUARES
PLAT CLOSURE:	1:81,228



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**REFERENCE**

1. PLAT BOOK 4 PAGE 296-B.

GRAPHIC SCALE  
 1" = 60'



**SURVEYOR'S CERTIFICATE**



This plat is a retracement of an existing parcel or parcels of land and does not subdivide or create a new parcel or make any changes to any real property boundaries. The recording information of the documents, maps, plats, or other instruments which created the parcel or parcels are stated hereon. RECORDATION OF THIS PLAT DOES NOT IMPLY APPROVAL OF ANY LOCAL JURISDICTION, AVAILABILITY OF PERMITS, COMPLIANCE WITH LOCAL REGULATIONS OR REQUIREMENTS, OR SUITABILITY FOR ANY USE OR PURPOSE OF THE LAND. Furthermore, the undersigned land surveyor certifies that this plat complies with the minimum technical standards for property surveys in Georgia as set forth in the rules and regulations of the Georgia Board of Registration for Professional Engineers and Land Surveyors and as set forth in O.C.G.A. Section 15-8-87.

Lewis R. Shelton 5/21/18  
 LEWIS R. SHELTON GEORGIA REGISTERED LAND SURVEYOR NO. 2971

**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. The new use will not interfere.

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

No impact expected.

- (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:

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

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## Gwinnett County

### Department of Planning & Development - Planning Division

446 West Crogan Street, Suite 250

Lawrenceville, Georgia 30046

To whom it may concern:

This requests a "Special Use Permit" to operate a Personal Care Home in 582 Rockbridge Road, Lilburn, Georgia 30047. This property is considered O&I Zoning, so we are also requesting a "Rezoning" of that land back to Residential. We registered this business under the name Cared by Sisters, and it will be run by the three sisters in the application. We are in the process of completing all legal and accounting matters.

Our mission is to provide a loving care environment for senior people that will accompany their life journey with dignity and respect. We aim to assist these residents not only with physical needs but also emotional support to ensure a complete and happy life. Their integrated wellbeing is at the core of our promise and to deliver on this mission, the staff has the skills and certifications needed. Apart from this, collectively, we have more than 25 years of experience assisting people with disabilities and related needs.

The owners have previous experience in Business Management, Marketing, IT, Montessori Certification, and Medical fields. Besides, we operated a Home Day Care in Dekalb County and are all actively involved in volunteering and heavily involved at church in the community.

We will offer the following specific services:

- A place to call "home" and surrounded by "family"
- Independent accommodations and cleaning (private room and bathroom)
- Personal care (bathing, grooming, continence assistance, medication assistance, laundry services, etc.)
- Healthy and balanced nutrition throughout the day
- Transportation to errands (medical, entertainment, family, church)
- Community and entertainment activities during the week (physical, emotional, social)
- Bilingual (Spanish and English)

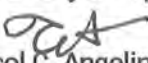
The residents will live on the property and have visiting hours for family/friends from 9:00 am to 6:00pm everyday.

As per the attachments in the application, the lot measures 1,181 acres, and consists of one building of 1,416 square feet (one floor) and an unfinished basement. We plan to maintain the current footprint of that building and build an addition to the house that will allow us to house up to 8 residents. We will have one staff person in the dwelling at all times, back up on call, and we will add more staff as needed when residents join.

The house has a parking space in the carport, and there are 3 more parking spaces measuring each 9 feet x 17.5 feet, and an additional Handicap parking space, which measures 13 feet x 17.5 feet. We intend to maintain the undisturbed buffers that exist in the lot.

We are planning to request a License to the State of Georgia for the Personal Care and it is our intention to abide by the regulations and norms established by Gwinnet County and the State of Georgia.

Thanks for your approval,

  
Marisol C. Angelini

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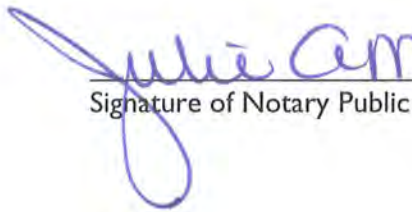
**SPECIAL USE PERMIT APPLICANT'S CERTIFICATION**

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.

  
\_\_\_\_\_  
Signature of Applicant

5/25/2018  
\_\_\_\_\_  
Date

Marisol C. Angelini  
\_\_\_\_\_  
Type or Print Name and Title

  
\_\_\_\_\_  
Signature of Notary Public

5-25-18  
\_\_\_\_\_  
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]*  
Signature of Property Owner

May 25, 2018  
Date

Marisol C. Angelini  
Type or Print Name and Title

*[Handwritten Signature]* 5-25-18  
Signature of Notary Public Date



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**SPECIAL USE PERMIT PROPERTY OWNER'S CERTIFICATION**

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Martha E Chacon 05/25/18  
Signature of Property Owner Date

Martha E. Chacon  
Type or Print Name and Title

Julie A Mason 5-25-18   
Signature of Notary Public Date Notary Seal

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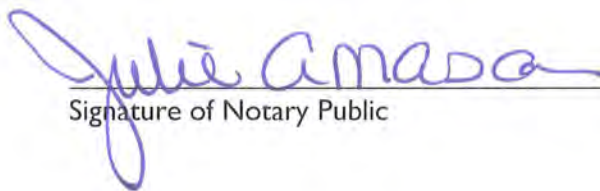
**SPECIAL USE PERMIT PROPERTY OWNER'S CERTIFICATION**

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\_\_\_\_\_  
Signature of Property Owner

5-25-18  
\_\_\_\_\_  
Date

Zolamar Chacon  
\_\_\_\_\_  
Type or Print Name and Title

  
\_\_\_\_\_  
Signature of Notary Public

5-25-18  
\_\_\_\_\_  
Date

  
Notary Seal

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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.

*CA*

Signature of Applicant

*Marisol C. Angelini*

Type or Print Name

*May 25, 2018*

Date

*Julie A. Mason*

Signature of Notary Public

*5-25-18*

Date



Notary Seal

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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.

OCA                      May 23, 2018                      MARISOL C. Angelini  
 SIGNATURE OF APPLICANT                      DATE                      TYPE OR PRINT NAME AND TITLE

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

Julie A Moson                      5-22-18  
 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    Marisol C. Angelini  
 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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**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:** 6th District  
(Map Reference Number) County Unincorporated 114 - R6114015  
District Land Lot Parcel

[Signature] May 22, 2018  
Signature of Applicant Date

MARISOL C. Angelini  
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)

[Signature] Tax Services Associate I  
NAME TITLE

5/22/2018  
DATE

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