#### SPECIAL USE PERMIT APPLICATION AN APPLICATION TO AMEND THE OFFICIAL ZONING MAP OF GWINNETT COUNTY, GA.

APPLICANT INFORMATION	PROPERTY OWNER INFORMATION*
NAME: BARNALAS Prison Ministry ADDRESS: P.D. Box 1234	NAME: Mike M=Grath ADDRESS: 3771 River MANION Dr
CITY: DACULA	CITY: PEAchtree Corners
STATE: <u>GA</u> ZIP: <u>30019</u> PHONE: <u>909-957-9779</u>	STATE: <u>GA</u> ZIP: <u>30096-6146</u> PHONE: <u>404-551-0449</u>
CONTACT PERSON: JAMES TRAINER CONTACT'S E-MAIL: JAMES FRAINER	

\*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:
OWNER'S AGENT PROPERTY OWNER CONTRACT PURCHASER
EXISTING/PROPOSED ZONING: BUILDING/LEASED SQUARE FEET: 2268
PARCEL NUMBER(S): R5162028 ACREAGE: 34.62 1.692
ADDRESS OF PROPERTY: 3847 Grayson Hwy LogANY. 1/10 64 300
SPECIAL USE REQUESTED: BARNALAS Rison Ministy Rehabilithtion
RE-ENtry Program

# PLEASE ATTACH A LETTER OF INTENT EXPLAINING WHAT IS PROPOSED

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BY: .....

#### LEGAL DESCRIPTION

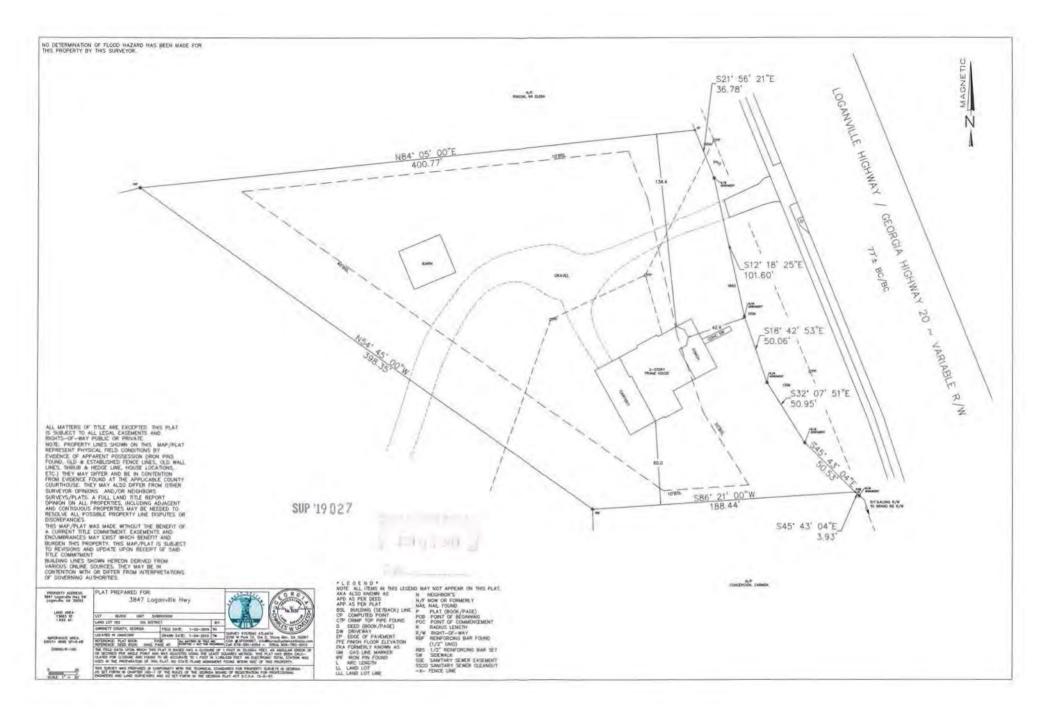
ALL THAT TRACT OR PARCEL OF LAND LYING AND BEING IN LAND LOT 162 OF THE 5th DISTRICT, GWINNETT COUNTY, GEORGIA AND BEING MORE PARTICULARLY DESCRIBED AS FOLLOWS:

COMMENCING AT A RIGHT OF WAY MONUMENT LOCATED 511'± ALONG THE WESTERLY RIGHT OF WAY OF LOGANVILLE HWY/GEORGIA HWY 20 (VARIABLE RIGHT OF WAY) AND THE NORTHERLY RIGHT OF WAY OF BRAND ROAD THENCE RUNNING ALONG THE WESTERLY RIGHT OF WAY OF LOGANVILLE HWY/GEORGIA HWY 20, S45°43'04"E FOR A DISTANCE OF 3.93' TO A CALCULATED POINT BEING THE POINT OF BEGINNING, FROM SAID POINT OF BEGINNING, THENCE CONTINUING ALONG AFOREMENTIONED RIGHT OF WAY S45°43'04"E FOR A DISTANCE OF 50.53' TO A RIGHT OF WAY MONUMENT, THENCE CONTINUING ALONG SAID RIGHT OF WAY S32°07'51"E FOR A DISTANCE OF 50.95' TO A RIGHT OF WAY MONUMENT, THENCE CONTINUING S18°42'53"E FOR A DISTANCE OF 50.06' TO A RIGHT OF WAY MONUMENT, THENCE CONTINUING S12°18'25"E FOR A DISTANCE OF 101.60' TO A RIGHT OF WAY MONUMENT, THENCE CONTINUING S21°56'21"E FOR A DISTANCE OF 36.78' TO A CALCULATED POINT, THENCE LEAVING SAID RIGHT OF WAY AND RUNNING N84°05'00"E FOR A DISTANCE OF 400.77' TO AN OPEN TOP PIPE, THENCE RUNNING N54°45'00"W FOR A DISTANCE OF 398.35' TO A REBAR FOUND, THENCE RUNNING S86°21'00"W FOR A DISTANCE OF 188.44' TO A CALCULATED POINT LOCATED ON THE WESTERLY RIGHT OF WAY OF LOGANVILLE HWY/GEORGIA HWY 20, SAID CALCULATED POINT BEING THE POINT OF BEGINNING,

SAID TRACT OR PARCEL OF LAND CONTAINS 73,683 SQUARE FEET OR 1.692 ACRES, BEING MORE PARTICULARLY DESCRIBED AND SHOWN ON SURVEY PREPARED FOR 3847 LOGANVILLE HWY., BY SURVEY SYSTEMS & ASSOC., INC., DATED 1-4-2019.



SUP '19 027



## 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

( VAINE) AMES

Type or Print Name and Title

EXPIRES THHIMM GEORGIA Signature of Notary Public Date "minimum"

0/08/19

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.

14

Signature of Applicant

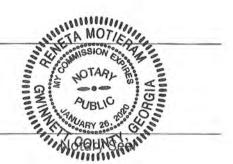
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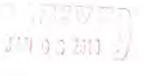
Date

Signature of Notary Public

Date



SUP '19 027



### 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:
- (B) WHETHER A PROPOSED SPECIAL USE PERMIT WILL ADVERSELY AFFECT THE EXISTING 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: V45
- (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:

No

UY:.

Barnabas Prison Ministry PO Box 1234 Dacula, GA 30019

October 29, 2018

Gwinnett County Planning Divison Letter of Intent Special Use Permit 446 West Crogan st Lawrenceville, GA 30046

Dear Sir or Madam:

Special use permit for State Re-entry Partnership Housing. RPH.

For State and Gwinnettt county Re-entry Partnership Housing RPH.

Please contact me if you have any questions or need additional information. I can be contacted by phone at (909)957-9779 or (770)978-9093. An e-mail can be sent to jamestrainer@hotmail.com.

Sincerely, . Intime Cen

Barnabas Prison Ministry



## 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.

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Signature of Property Owner

12/1/18

Date

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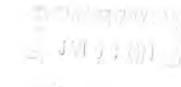
michael ncGrath

Type or Print Name and Title

Signature of Notary Public

Date

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TYPE OR PRINT NAME AND TITLE

NOTARY SEAL

# 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, <u>Conflict of Interest in Zoning Actions</u>, and has submitted or attached the required information on the forms provided.

12/3/18 JAMES E. IGAINEN SIGNATURE OF APPLICANT TYPE OR PRINT NAME AND TITLE DATE

SIGNATURE OF APPLICANT'S ATTORNEY OR REPRESENTATIVE

SIGNATURE OF NOTARY PUBLIC

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# 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?

DATE

_	N	-	100	1
_YES	NO	JAMES	E.	IFA

OUR NAME

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

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

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

7

SUP '19 0 27

## 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.

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

5162028 162028 Gwipvett OI PARCEL I.D. NUMBER: (Map Reference Number) District Land Lot Parcel Signature of Applicant Date risid JAMES Car

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)

NAME

DATE

8

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