



RECEIVED  
OCT - 9 2009  
City of Roswell  
Community  
Development  
Dept.

Index #: \_\_\_\_\_

Genero #: \_\_\_\_\_

Legistar #: \_\_\_\_\_

## DESIGN PLAN APPLICATION (DRB/HPC)

### TYPE OF REQUEST:

#### Design Review Board

- ☒ Minor  
☐ Major Initial  
☐ Major Final

#### Historic Preservation Commission

- ☐ Minor  
☐ Major Initial  
☐ Major Final  
☐ Certificate of Appropriateness

Present Zoning

MA

Requested Zoning

NA

Proposed Use

NA

Total Acreage

MA

### PROJECT

Name of Project Housing Authority

Property Address/Location Grove Place City Roswell Suite/Apt. # Roswell GA 30075

Land Lot

District

Section

Property ID

### APPLICANT/OWNER

Applicant HOUSING AUTHORITY CITY ROSWELL

Company P.O. Box 1106

Mailing Address 770 993-6226 Suite/Apt. # Roswell GA 30077

Phone

Cell Phone

Fax Phone

E-mail

### REPRESENTATIVE

Contact Name and Company (Owner's Agent or Attorney) HARRY PELFREY DIRECTOR  
P.O. Box 1106

Contact Mailing Address 770 993-6226 Suite/Apt. # Roswell GA 30077

Phone

Cell Phone

Fax Phone

E-mail

I hereby certify that all information provided herein is true and correct

Applicant Signature: [Signature] DIRECTOR  
Property Owner or Owner's Representative

Date: 10 / 08 / 2009

OFFICE USE

Fee: \$ NA

☐ Cash ☐ Check # \_\_\_\_\_

☐ CC - Visa/ MC

Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

☐ Approved

☐ Denied By: \_\_\_\_\_

Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

### Application Signature Page

Please complete this **Applicant Signature Page** for ALL applications. **READ CAREFULLY BEFORE SIGNING.**

- I understand that failure to supply all required information (per the relevant Applicant Checklists and requirements of the *Roswell Zoning Ordinance*) will result in REJECTION OF THE APPLICATION.
- I understand that preliminary approval of my design plan does not authorize final approval of my zoning or signage request. I agree to arrange sign permitting separately, after approval is obtained.
- I understand that representation associated with this application on behalf of the property owner, project coordinator, potential property owner, agent or such other representative shall be binding.
- I have read the provisions of the Georgia Code Section 36-67A-3 as required regarding Campaign Disclosures. My signed Campaign Disclosure Statement is included with this Application (required for rezoning only).
- I understand that due to a sewer allocation system controlled by Fulton County, sewerage capacity may not be available. I agree to arrange sewer service separately from this application. The method of sewage disposal that is planned for this property is:

Check one:

- ☒ Sanitary Sewer  
☐ Septic Tank

*I respectfully petition that this property be considered as described in this application*

From Use District \_\_\_\_\_

To Use District: \_\_\_\_\_

Wherefore, applicant prays that the procedures incident to the presentation of this petition be taken, and the property be considered accordingly. Additionally, applicant further acknowledges and fully understands all above statements made by the City of Roswell.

#### APPLICANT SIGNATURE (REQUIRED FOR ALL APPLICATIONS)

*I hereby certify that all information provided herein is true and correct*

*Harry A. Pelfrey, Executive Director Housing Authority*

Owner of Property (Signature)

*199 GEORGE WAY P.O. Box 1106 Roswell GA 30077*

Street Address, City, State, Zip

Date: *10 / 9 / 09*

*770 993-6226*

Phone

#### NOTARY

Personally appeared before me the above Owner named *Harry A. Pelfrey, Exec. Dir., Roswell Housing Auth.* who on oath says that he/she is the Applicant for the foregoing, and that all the above statements are true to the best of his/her knowledge.

*Lynn Naleik*  
Notary Public (Signature)

Date: *10 / 09 / 09*

Date: *08 / 16 / 10*  
Commission Expires

#### ATTORNEY / AGENT (IF APPLICABLE)

\_\_\_\_\_  
Attorney / Agent (Signature)

Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_

\_\_\_\_\_  
Street Address, City, State, Zip

\_\_\_\_\_  
Phone







## Design Plan Orientation Meeting

This form must accompany any application submitted for Design Review Board, Historic Preservation Commission and Certificate of Appropriateness.

Project Discussed Housing Authority  
Greene Place

Location Address \_\_\_\_\_

Current Zoning / Conditions \_\_\_\_\_

Design Districts/Guidelines \_\_\_\_\_

Conditions if Applicable \_\_\_\_\_

### FAMILIARIZED THE APPLICANT WITH THE FOLLOWING:

|  |   |
|--|---|
| <input checked="" type="checkbox"/> Zoning of the property and conditions, if applicable   | <input checked="" type="checkbox"/> Tree Ordinance requirements   |
| <input checked="" type="checkbox"/> Property classification (HPC only)                     | <input checked="" type="checkbox"/> Archaeological Sites requirements   |
| <input checked="" type="checkbox"/> Overlay District Guidelines                            | <input checked="" type="checkbox"/> Conceptual Storm Water Management Plan approved by City Engineer  |
| <input checked="" type="checkbox"/> Historic District Design Guidelines                    | <input checked="" type="checkbox"/> Small Tract Status requirements (DRB only)  |
| <input checked="" type="checkbox"/> Midtown Roswell Design District Guidelines             | <input checked="" type="checkbox"/> Area calculations on site plan requirements   |
| <input checked="" type="checkbox"/> Parkway Village District Guidelines                    | <input checked="" type="checkbox"/> Application & signature requirements  |
| <input checked="" type="checkbox"/> Certificate of Appropriateness requirements (HPC only) | <input checked="" type="checkbox"/> Fee Schedule  |
| <input checked="" type="checkbox"/> Use allowed  | <input checked="" type="checkbox"/> Calendar of Submission Deadlines and Meeting Dates  |
| <input checked="" type="checkbox"/> Minimum setbacks on the property                       | <input checked="" type="checkbox"/> Directed to the following departments for further information: Engineering, Landscape Architect, Building Inspector, Arborist, Transportation, Public Works, Fire |
| <input checked="" type="checkbox"/> Height limitations                                     | <input checked="" type="checkbox"/> Advised of Land Disturbance Permit process  |
| <input checked="" type="checkbox"/> Parking requirements                                   | <input checked="" type="checkbox"/> Advised of Development Permit process   |
| <input checked="" type="checkbox"/> Traffic Impact Study requirements                      | <input checked="" type="checkbox"/> Advised of Building Permit process  |
| <input checked="" type="checkbox"/> Outdoor lighting requirements                          |   |
| <input checked="" type="checkbox"/> Dumpster enclosure requirements                        |   |
| <input checked="" type="checkbox"/> Buffer requirements                                    |   |
| <input checked="" type="checkbox"/> Stream buffer requirements                             |   |
| <input checked="" type="checkbox"/> Landscaping requirements                               |   |

NA = Not Applicable

R = Required

NR = Not Required

The below signature acknowledges that:

1. The required orientation meeting occurred on the date stated below;
2. The Zoning Ordinance has been made available for review and purchase;
3. Copies of discussed information have been provided as requested.
4. The repainting of existing building that includes exterior changes shall be considered a major design.

Gloria Payer Director  
Applicant/Representative Attending (Signature)

Date: 10 / 9 / 09

Staff Attendee (Signature) \_\_\_\_\_

Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

