



Index #: 10-30

Genero #: 10070062

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: C-3 Parkway Village Overlay

Requested Zoning: same

Proposed Use: Retail/Grocery/Fuel

Total Acreage: 11.493

**PROJECT**

Name of Project: Mansell Road at Highway 92-Commercial

Property Address/Location: NW Corner of Intersection of Mansell Rd @ Hwy 92 Roswell GA

Land Lot: 447,448,467,468 District: 1st Section: 2nd Suite/Apt. #: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Property ID: \_\_\_\_\_

**APPLICANT/OWNER**

Applicant: Charles D. Owen III - Fletcher Crossing

Company: Fletcher Crossing

Mailing Address: 4600 Hendersonville Road Suite/Apt. #: \_\_\_\_\_ City: Fletcher NC State: \_\_\_\_\_ Zip Code: 28732

Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Fax Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

**REPRESENTATIVE**

Contact Name and Company (Owner's Agent or Attorney): Jessie Shannon - Eastlan Capital

Contact Mailing Address: 3328 Peachtree Rd NE Suite/Apt. #: \_\_\_\_\_ City: Atlanta GA State: \_\_\_\_\_ Zip Code: 30326

Phone: 404-574-5913 Cell Phone: \_\_\_\_\_ Fax Phone: \_\_\_\_\_ E-mail: Jshannon@eastlancapital.com

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

Applicant Signature: \_\_\_\_\_  
 Property Owner or Owner's Representative

Date: 7 / 6 / 10

OFFICE USE Fee: \$ \_\_\_\_\_  Cash  Check # \_\_\_\_\_  CC - Visa/ MC \_\_\_\_\_ Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Approved  Denied By: \_\_\_\_\_ Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

REPRESENTATIVE APPLICANT PROJECT TYPE





**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: <input checked="" type="checkbox"/> Sanitary Sewer <input type="checkbox"/> Septic Tank
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*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*


\_\_\_\_\_  
 Owner of Property (Signature)  
3328 Peachtree Road, Suite 300, Atlanta GA 30326  
 Street Address, City, State, Zip

Date: 07/06/10  
404-574-5913  
 Phone

**NOTARY**

Personally appeared before me the above Owner named Shannon 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.

\_\_\_\_\_  
 Notary Public (Signature)



Date: 02/18/2013  
 Commission Expires

**ATTORNEY/ AGENT (IF APPLICABLE)**

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

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

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

\_\_\_\_\_  
 Phone

CITY OF ROSWELL, GEORGIA

RECEIPT NUMBER: 94000021442

RECEIVED BY: WINFREY  
TODAY'S DATE: 07/06/10  
TIME: 16:48

PAYOR: MANSELL RD DRB FEE  
REGISTER DATE: 07/06/10

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ZDRB	10070062		\$350.00
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CARD NO: VISA		TOTAL DUE:	\$350.00

CREDIT PAID	TENDERED	CHANGE
\$350.00	\$350.00	\$.00