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Case #: 09-55 Case #: 09-0905 Case #: DESIGN PLAN APPLICATION (DRB/HPC) TYPE OF REQUEST: Design Review Board 6-3 Present Zoning ☐ Minor Major Initial 6-3 Requested Zoning ☐ Major Final 4 Historic Preservation Commission CAR DEALERSHIP Proposed Use ☐ Minor ☐ Major Initial 5.45 ACRES ☐ Major Final Total Acreage ☐ Certificate of Appropriateness **PROJECT** L PALMER CJD ш 11460 ALPHARETTA HIGHWAY, ROSWELL, GA 30076 0 Property Address/Location 517 x 540 Land Lot District APPLICANT/OWNER CHUCK PALMER PLICAN Applicant DODGE, INC. PALMER HUY, ROSVELL, GA. Mailing Address City State Zip Code 770-410 459 Fax Phone Phone Cell Phone E-mail REPRESENTATIVE ш MUNOZ ALEX RESENTATIV Contact Name and Company (Owner's Agent or Attorney) TLANTA, GA, 30305 452 E. PACES FERRY RD. Contact Mailing Address Suite/Apt. # City State Zip Code ALEX @ MUNOZARCH. COM 404) 876-8413 Phone Fax Phone E-mail Cell Phone I hereby certify that all information provided herein is true and correct Date: 10 , 06 , 09 EP Applicant Signature: Property Owner or Owner's Representative **OFFICE USE** □ Cash □ Check # □ CC - Visa/ Date: Fee: \$_ ☐ 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:		eck one: Sanitary Sewer Septic Tank				
	I respectfully petition that this property be considered as described in this a From Use District C - 3 To Use District:		i				
	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						
	Hereby certify must all information provided herein is true and correct						
	Owner of Property (Signature) 11960 A phane 11 Hwy Ros well Ga 30076 Street Address, City, State, Zip		Date: 16 0) 6 9 770 - 410 - 11 1 Phone				
	Notary		WEISHA BU				
Personally appeared before me the above Owner named who ch							
	oath says that he/she is the Applicant for the foregoing, and that all the above statements are true of ARL to the best of his/her knowledge.						
	Notary Public (Signature) Date: 10 / 01 / 09		Date: 09 11k / 2017/BLIC Commission Express OC7 11TH, 2011				
	ATTORNEY/AGENT (IF APPLICABLE)		TOUNTY WINING				
			Date: / /				
	Attorney/Agent (Signature)		AEC A				
	Street Address, City, State, Zip		Phone On VED				
			0/2 6 2				

City of Roswell 38 Hill Street Suite G - 30 Roswell, Georgia 30075 770-641-3780

Planning & Zoning Division Application 11/24/08 Page 3

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	DESIGN PLAN APPLICATION (DRB/HPC)				
PROJECT	Total Area of Lot Building Footprint Landscape Coverage Parking Spaces: Height	237,752.87 In Sq. Ft. 25,765 In Sq. Ft. 53,080 In Sq. Ft. # Required 30-0" Height	5, 4582 Acreage /0.8 % In % 22-33 % In % N/A # Planned	Major \square Minor Application Date: $\underline{JO} / \underline{66} / \underline{v9}$ Orientation Date: $\underline{9} / \underline{74} / \underline{v9}$ Board Meeting Date: $\underline{JJ} / \underline{3} / \underline{v9}$	
PROJECT MGR.	### ALEX MUNOZ — ALEX MUNOZ & ASSOC. INC. Contact Name and Company (Project Manager or Owner's Representative) 452 E. PACES FERRY RD, ATLANTA, SA, 30305 Contact Mailing Address City State Zip Code ###################################				
PRO	Contact Mailing Addres 404 B76-8169 Phone	404 S58 44-87 Cell Phone	City State 4 v4 8 7 6 ~ 8 1 6 9 Fax Phone	Zip Code ALEX & MUNOZARCH.COM E-mail	
Contact Name and Company (Engineer) Phone Cell Phone Fax Phone				E-mail	
CAPE	N/A Contact Name and Company (Landscape Architect)				
LANDSCAPE	Phone	Cell Phone	Fax Phone	E-mail	
OTHER	Contact Name and Company (Other) Phone Cell Phone Fax Phone E-mail				
REMARKS				uled upon a determination of <i>completeness</i> e meeting and make the presentation.	

OCT - 6 2009