

BZA Case #: 09070385; 09070386

Admin Case #: _____

VARIANCE APPLICATION

TYPE OF REQUEST: ☒ Variance (BZA)
☐ Variance (Administrative)

Total Area of Lot	<u>48,573</u> In sq. ft.	<u>1.115</u> Acreage	Minimum Setback Requirements	Proposed Setback Requirements
Building Footprint	<u>7,263</u> In sq. ft.	<u>15</u> In %	<u>20</u> Front	<u>20</u> Front
Landscape Coverage	<u>19,994</u> In sq. ft.	<u>41</u> In %	<u>10</u> Side	<u>10</u> Front
No. Parking Spaces	<u>20</u> Required	<u>37</u> Planned	<u>20</u> Rear	<u>20</u> Front
Height	_____	_____	Other	Front

PROJECT

Name of Project/Subdivision Name: 11575 KING RD.
Property Address/Location: 311 1ST Suite/Apt. # 2ND City Roswell State GA Zip Code 30075
Land Lot: _____ District: _____ Section: R-2C Property ID: R-2C
Lot Number: _____ Block: _____ Present Zoning: 12-1650031107 Proposed Zoning: _____

APPLICANT/OWNER

Applicant: MARILYN WANKAT
Company: Sutton Country Day School Ltd.
Mailing Address: 60 SEMINOLE LANDING RD. City Atlantic Beach State FL Zip Code 32233
Phone: 904-241-9879 Cell Phone: 904-333-9775 Suite/Apt. # _____ Fax Phone: 904-246-7590 E-mail: wankat_m@popmail.fiv.edu

REPRESENTATIVE

Representative: BRAD RIFFEL - AEC INC.
Contact Name and Company (Owner's Agent or Attorney): 50 WARM SPRINGS CIRCLE
Contact Mailing Address: 770-641-1942 City Roswell State GA Zip Code 30075
Phone: _____ Cell Phone: 770-778-1903 Suite/Apt. # _____ Fax Phone: 770-998-6924 E-mail: bdr@aceatl.com

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

Date: 7 / 24 / 09

Applicant Signature: Property Owner or Owner's Representative

Marilyn Wankat

OFFICE USE

Fee: \$ _____ ☐ 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 R-2c

To Use District: F-2c

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

Marilyn Woullet
Owner of Property (Signature)
160 Seminole Landing Rd., Atlantic Beach, FL 32233
Street Address, City, State, Zip

Date: 7 / 24 / 09
904-241-9879
Phone

NOTARY

Personally appeared before me the above Owner named _____ 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.

Joseph Cox
Notary Public (Signature)

Date: 7 / 24 / 09

Date: 01 / 22 / 2012
Commission Expires

ATTORNEY / AGENT (IF APPLICABLE)

Quincy D. Light
Attorney/Agent (Signature)
50 WARM SPRINGS circle
Street Address, City, State, Zip Roswell GA 30075

Date: 7 / 27 / 09
770-641-5542
Phone

