



OCONEE COUNTY APPEAL APPLICATION

Type of Appeal Submitted:

- Hardship Variance
 Appeal of Administrative Decision
 Flood Damage Prevention Variance
 Special Exception for: Reduction of side yard setback from 25' to 15'

Applicant	Property Owner
Name: <u>Bob Smith - Smith Planning Group</u>	Name: <u>KATHERINE NICOLE BURGDORF</u>
Address: <u>1022 Twelve Oaks Place, Ste 201</u> <small>(No P.O. Boxes)</small>	Address: <u>2440 UNION CHURCH ROAD</u> <small>(No P.O. Boxes)</small>
<u>Watkinsville, GA 30677</u>	<u>BISHOP, GA 30621</u>
Telephone: <u>(706) 769-9515</u>	Telephone: <u>(706) 202-4240</u>

Applicant is (check one): the Property Owner Not the Property Owner (attach Property Owner's Authorization)

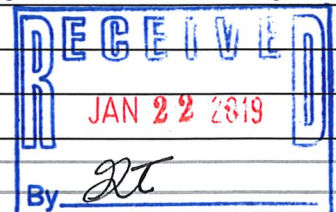
Applicant's Certification: I hereby certify that the information contained in and attached to this application is true and correct.

Signature: *Bob Smith* Date: 1/21/19 Notarized: _____



Property	Use
Location: <u>2440 UNION CHURCH ROAD</u>	Current Use: <u>RESIDENTIAL</u>
Tax Parcel Number: <u>A 07 035A</u>	Proposed Use: <u>RESIDENTIAL</u>
Size (Acres): <u>1.00</u> Current Zoning: <u>A-1</u>	
Future Development Map—Character Area Designation: <u>COUNTRY ESTATES</u>	

Attachments (check all that apply)	Appeal or Variance Requested
<input checked="" type="checkbox"/> Property Owner's Authorization (if applicable) <input checked="" type="checkbox"/> Application Fee <input checked="" type="checkbox"/> Warranty Deed(s), Legal Description, & Plat of Survey <input checked="" type="checkbox"/> Disclosures <input checked="" type="checkbox"/> Maps or Drawings Illustrating Variance Request <input checked="" type="checkbox"/> Narrative Statement Explaining Variance Request <input checked="" type="checkbox"/> Concept Plan	Provide the code section and briefly explain the requested variance <u>Sec 409.01 Setback Requirements &</u> <u>Table 4.6 Minimum Setback - Principal Buildings</u> Variance request is to reduce the side yard setback from 25' to 15' in order to construct a garage attached to the existing house.



For Oconee County Staff Use Only

Application	Date Received: <u>1/22/19</u> Date Accepted: <u>1/28/19</u>	APPLICATION NUMBER <u>7703</u>
	DRI Transmitted to RDC <input type="checkbox"/> Date: _____ <input type="checkbox"/> N/A	
	Review Submitted: _____ Location Map: _____	
	Posted: _____ Ad: _____ Ad: _____	
	Application Withdrawn <input type="checkbox"/> Date: _____	
Action	Administrative Appeal: Date: _____	
	<input type="checkbox"/> Approved <input type="checkbox"/> With Conditions <input type="checkbox"/> Denied <input type="checkbox"/> N/A Board of Commissioners Date: <u>4/2/19</u> <input type="checkbox"/> Approved <input type="checkbox"/> With Conditions <input type="checkbox"/> Denied <input type="checkbox"/> N/A	