

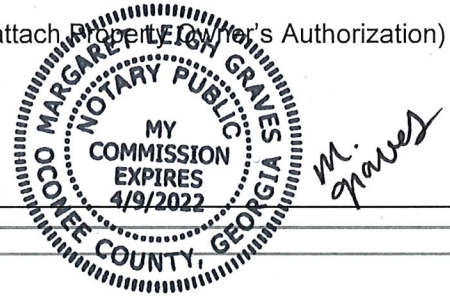


OCONEE COUNTY APPEAL APPLICATION

Type of Appeal Submitted:

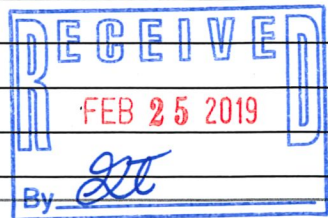
- Hardship Variance
 Appeal of Administrative Decision
 Flood Damage Prevention Variance
 Special Exception for: Buffer reduction

Applicant	Property Owner
Name: <u>SMITH PLANNING GROUP, LLC</u>	Name: <u>Magnolia Valley Properties, LLC</u>
Address: <u>1022 TWELVE OAKS PL, SUITE 201</u> <small>(No P.O. Boxes)</small> <u>WATKINSVILLE, GA 30677</u>	Address: <u>465 Huntington Road, Ste 140</u> <small>(No P.O. Boxes)</small> <u>Athens, GA 30606-1857</u>
Telephone: <u>(706) 769-9515</u>	Telephone: <u>706-353-6086</u>
Applicant is (check one): <input type="checkbox"/> the Property Owner <input checked="" type="checkbox"/> 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: <u><i>[Signature]</i></u>	Date: <u>2/26/19</u> Notarized: <u><i>[Signature]</i></u>



Property	Use
Location: <u>1170 Mars Hill Road</u> <u>Watkinsville, GA 30677</u>	Current Use: <u>Undeveloped</u>
Tax Parcel Number: <u>Portion of C 02 045A</u>	Proposed Use: <u>Retail</u>
Size (Acres): <u>0.94 AC</u> Current Zoning: <u>B-1</u>	
Future Development Map—Character Area Designation: <u>Civic Center</u>	

Attachments (check all that apply) <input type="checkbox"/> Property Owner's Authorization (on file from Rezone Case # 7657) <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	Appeal or Variance Requested <i>Provide the code section and briefly explain the requested variance</i> <u>UDC Code 806 requires a 50' wide buffer where commercial use adjoins a residential use. The variance request is for the buffer width to be reduced to 10'</u>
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<i>For Oconee County Staff Use Only</i>	
Application Date Received: <u>2/5/19</u> Date Accepted: _____ DRI Transmitted to RDC <input type="checkbox"/> Date: _____ <input checked="" type="checkbox"/> N/A Review Submitted: _____ Location Map: _____ Posted: _____ Ad: _____ Ad: _____ Application Withdrawn <input type="checkbox"/> Date: _____	APPLICATION NUMBER <input type="text"/> 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: _____ <input type="checkbox"/> Approved <input type="checkbox"/> With Conditions <input type="checkbox"/> Denied <input type="checkbox"/> N/A