

Conditional Use Permit Application

Carroll County
423 College Street

Department of Community Development
Carrollton, GA 30117 (770) 830-5861



Date Received: 5-16-17
Received by: VW
CK# 1646

Application must be filed by noon on the 3rd Tuesday of the month to go on the next month's agenda.
No exceptions

Please complete the blanks with the requested information. If any of the information or required materials is missing or incomplete, the application will not be processed.

APPLICANT	Applicant Name: <u>Agnes Mitchell</u>
	Address: <u>218 Hidden Lakes Dr</u> City: <u>Carrollton</u> State: <u>GA</u> Zip: <u>30116</u>
	Phone: <u>770 596-3935</u> Fax: () _____ Email: <u>threegone@live.com</u>
	Agent Name: _____
	Address: _____ City: _____ State: _____ Zip: _____
Phone: () _____ - _____ Fax: () _____ - _____ Email: _____	
Owner Name (If different from applicant): _____	
Address: _____	
Phone: () _____ - _____ Fax: () _____ - _____	
<i>(Note: A notarized statement signed by the property owner(s) authorizing the applicant to make this request shall be attached to the application.)</i>	

CONDITIONAL USE	Project Name: <u>The Gazebo at Lake Tisinger</u>
	Conditional Use Location (attach location map): <u>5200 Smithfield Road, Bowdon, GA</u>
	Proposed Use: <u>Venue Small parties/weddings 75-100 guest max</u>
	Total acreage: <u>18</u>
	Describe Proposed Conditional Use: <u>We would like to use the property as a venue for parties/weddings.</u>

Staff Use Only

Land Lot <u>97</u> of the <u>9th</u> District, Carroll County	Tax Map <u>28</u>	Parcel <u>10116</u>
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SPECIFIC INFORMATION

Describe how the proposed Conditional Use will affect:

Traffic:

Parking:

Availability of Public Facilities/Utilities:

Other relevant Impacts of the Proposal:

Describe how the proposed Conditional Use will be a benefit to the public.

Required Materials to Accompany the Application:

1. Completed application and the fee.
2. Copy of deed, lease, option agreement or other evidence of ownership or applicant's interest in the property. If the applicant is not the owner, attach a notarized statement signed by the owner authorizing the applicant to request the amendment.
3. All required items listed in the **Submittal Requirements checklist**.

Return Form to:

*Artagus Newell or Margie Milam
Department of Community Development
423 College Street
Carrollton, Georgia 30117*

For Department Use Only

Application No: C-17-06-02
Filing Fee: \$250 ✓
Pre-Application Conf: CP ✓
Date Advertised: 6/11/17
Date Notices Sent: 6/16/17
PC Public Hearing Date: 6/27/17
BoCC Public Hearing Date: 7/11/17
Disposition: _____
Approved by Resolution #: _____

CARROLL COUNTY COMMUNITY DEVELOPMENT
INTEROFFICE MEMORANDUM

TO: CARROLL COUNTY PLANNING & ZONING COMMISSION & CARROLL COUNTY BOARD OF COMMISSIONERS
FROM: ARTAGUS NEWELL, ZONING ADMINISTRATOR
SUBJECT: STAFF ANALYSIS OF THE CONDITIONAL USE PERMIT FILED BY AGNES MITCHELL
DATE: JUNE 16, 2017
CC: BEN SKIPPER, DIRECTOR

Property Information, Tax Parcel Number: 028-0016
Located at 5200 Smithfield Road, Bowdon, GA 30108
Current Property Owner: Agnes Mitchell
Commission District 6; George Chambers

Current Zoning Classification: AG
Proposed Zoning Classification/Use: To remain AG; applicant is requesting a Conditional Use Permit to operate a Special Events Venue for weddings etc.
Future Land Use/Growth Tiers Designation: AG
Watershed Location: Turkey Creek

Land Use Analysis:

The subject property consists of 18 acres and has a cabin and gazebo structure. The applicant is requesting to operate a Special Events venue for weddings etc. The property is adjacent to Lake Tisinger, the City of Bowdon's drinking water reservoir. The City Limits of Bowdon are adjacent to the property, as are county-zoned Agriculture, R-2 (1-acre residential), Mobile Home Park, Industrial, Commercial R-3 (1/2-acre residential) zoning classifications.

Brief descriptions of departmental comments on this request are as follows:

Carroll County Public Works

1. Access is via Smithfield Road which is suitable to handle this request.

Carroll County Community Development

1. Approximately 1% of the subject property is within the 100-year flood plain.
2. There are "state waters" on the property.
3. Water runoff enters into Turkey Creek
4. Anticipated Traffic Generation rate is 3 trips per 1000 square feet of gross floor space

Carroll County Fire Department

1. No comments received, however, there needs to be adequate access for emergency vehicle apparatus to enter and exit the property.

Carroll County Board of Education

1. The nearest schools are Bowdon Elementary, Bowdon Middle and Bowdon High School. The rated capacities are BES-875 (3 miles away), BMS-500 (6.1 miles away), BHS (4.2 miles away)-625.

Carroll County Water Authority

1. The property lies within the City of Bowdon's Water Service District

Additional Comments: All Received Departmental Comments Available Upon Request

Carroll County, Georgia

Application: C-17-06-02

Applicant: Agnes Mitchell

Parcel: 028-0016



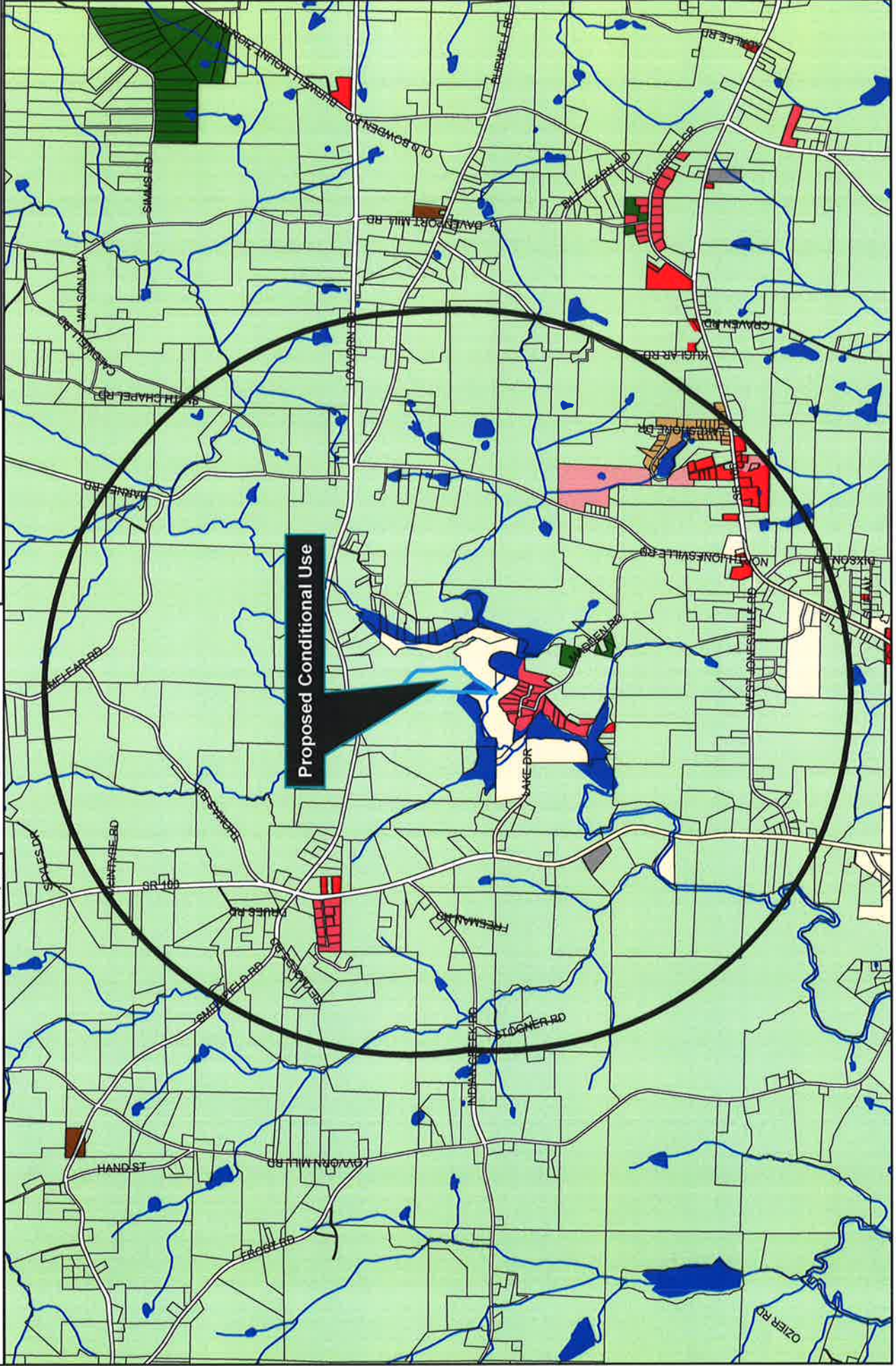
1.5 Mile Radius

Municipal

Bodies of Water

A	MFR	R1
C	MHS	R2
HDDR	OI	R3
I	PUD	R30

Carroll County GIS





Overview



Legend

-  Parcels
-  Roads
-  City Labels

Parcel ID	0280016	Owner	MITCHELL JAMES W & AGNES T	Last 2 Sales			
Class Code	Residential		(JTRS)	Date	Price	Reason	Qual
Taxing District	COUNTY		389 GARRETT CIRCLE	6/5/2014	\$125000	FM	Q
	COUNTY		CARROLLTON GA 30117	12/30/1996	\$0	FS	U
Acres	18.52	Physical Address	SMITHFIELD RD				
		Assessed Value	Value \$52599				

(Note: Not to be used on legal documents)

Date created: 6/19/2017
 Last Data Uploaded: 6/16/2017 12:50:53 AM

 **Developed by**
 The Schneider Corporation

PARCEL INFORMATION SHEET & APPLICATION FOR ZONING COMPLIANCE CERTIFICATE

*To be completed by Community Development Staff with information from www.carrolltax.com or
to be filled out by Map Room Personnel in Room #414.*

DEPARTMENT STAFF/MAP ROOM OFFICAL: _____

MAP: 28 **LAND LOT:** 99

PARCEL: 16 **DISTRICT:** 9

CURRENT PROPERTY OWNER: James & Agnes Mitchell

PROPERTY OWNER AS OF JANUARY 1ST: _____

APPLICANT (IF DIFFERENT FROM OWNER): _____

PROJECT ADDRESS: Stratfield Rd

CITY: Borden, IA 30108

TELEPHONE # (PRIMARY CONTACT): _____ OWNER BUILDER

EMAIL ADDRESS (PRIMARY CONTACT): _____

SUBDIVISION: _____ **LOT #:** _____

ACREAGE: _____ **PARCEL SPLIT FROM:** _____

CURRENT ZONING CLASSIFICATION	<u>AG</u>
REQUIRED SETBACKS	FRONT <u>100</u>
	SIDE <u>15</u>
	REAR <u>15</u>

CERTIFICATE OF ZONING COMPLIANCE – CHECKLIST

- Owner(s) & Agent (if applicable)
- Legal Description or Adequate Description of Property
- Complete Inventory of Existing Structures (noting uses & non-conforming structures)
- Complete Inventory of Proposed Structures
- Complete Inventory of Existing Uses and/or Activities
- Applicant's Certification

Signature of Zoning Administrator or Designee:  **Date:** 5/16/17

Comments: _____

CDP COMPLIANCE	<input type="checkbox"/> YES <input type="checkbox"/> NO	Signature of CDP Administrator or Designee: _____ Date: _____ Comments: _____
PLAT APPROVED	<input type="checkbox"/> YES <input type="checkbox"/> NO	Signature of County Engineer or Designee: _____ Date: _____ Comments: _____
APPROVED FOR NEW ADDRESS	<input type="checkbox"/> YES <input type="checkbox"/> NO	Signature of Zoning Administrator or Designee: _____ Date: _____ Comments: _____

Appearance Statement

Appearance Before Commission Bodies Required

To process the application for Conditional Use Permits or Rezoning, the Developer, Owner, Applicant, Agent or a Representative thereof must be present to *personally* request said Conditional Use or Rezoning before BOTH the Planning Commission AND the Board of Commissioners. Applicants requesting a Variance must also *personally* present their request in front of the Community Development Board of Appeals.

Failure to personally appear before *either* required Board may result in denial of request, or an extended waiting period before the next available meeting. *Requests that are denied by the Board of Commissioners cannot be re-submitted for consideration for a term not less than one (1) year from the date of the denial by the Board of Commissioners.*

The Planning Commission will hear your request on; 6/27/17 at 6:30 PM

The Board of Commissioners will hear your request on; 7/11/17 at 6:30 PM

The Board of Appeals will hear your request on; — at 5:30 PM

IMPORTANT

An orange stake shall be placed on the subject property until the zoning sign is affixed. Failure to place and/ or maintain the stake *will delay your application for 30 days*. It is the sole responsibility of the owner/applicant to place the stake and maintain its placement until the sign is affixed. Owner/applicant shall notify Community Development immediately if the sign is removed, defaced, incorrect etc. Owner/applicant shall have five business days in which to place the stake after the filing deadline. (3rd Tuesday of each calendar month)

Applicant Signature. Sydney Mitchell

Date. 5-15-17

- * All meetings are held in the Commission Chambers of the David Perry Administration Building located at 423 College Street, Carrollton, GA 30117.
- * Unless otherwise stated.

STATE OF GEORGIA
COUNTY OF CARROLL



AFFIDAVIT FOR A The Hazels at Lake Insinger

Agnus Mitchell, personally appeared before me, the undersigned officer, duly authorized to administer oaths in the State of Georgia and, having been duly sworn, sets forth the following statements for the purpose of being granted approval for a _____ under the Ordinances of Carroll County:

The information contained within the application attached hereto and filed in the Department of Community Development consists of facts within my personal knowledge that I know are true and correct, and will be relied upon by officials of Carroll County in making a decision whether to issue this Application, License, Permit, or other Department approval.

On behalf of the Applicant, I declare that the Applicant, regardless if a partnership, corporation, or other organization or entity that is receiving a benefit under this Application, License, Permit, or other Department approval (whichever is applicable) is not delinquent in the payment of any taxes or fees due Carroll County.

FURTHER AFFIANT SAYETH NOT.

I declare under penalty of false swearing that the above is true and correct.

This 9 day of June, 2017.

Agnus Mitchell

Address: 318 Hidden Lakes Drive
Carrollton, Ga 30116

Sworn to and subscribed
before me this 9 day
of June, 2017

[Signature]
Notary Public

My Commission Expires:

If Affiant is authorized to sign on behalf of a partnership, corporation, or other organization or entity, please set forth the entity and address

Entity: _____
Address: _____
