



Carroll County Department of Community Development

423 College Street
P.O. Box 338

Carrollton, GA 30117
(770) 830-5861

CONDITIONAL USE APPLICATION

Date Received: 6-6-22
Received by: JLT

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: JCI
Address: 3691 Carrollton Villa Rica Hwy. City: Carrollton State: GA Zip: 30116
Phone: (770) 328 - 8632 Fax: () - Email: JLM369130116@gmail.com
770 891 4309

Agent Name: _____
Address: _____ City: _____ State: _____ Zip: _____
Phone: () - Fax: () - Email: _____

Owner Name (If different from applicant): Tanner Medical
Address: _____
Phone: () - Fax: () -

(Note: A notarized statement signed by the property owner(s) authorizing the applicant to make this request shall be attached to the application.)

PROJECT

Project Name: _____
Conditional Use Location (attach location map): Hwy. 161
Proposed Use: Expansion of Business / Truck parking
Square Footage of Proposed Residence: _____
(must be at least 1,230 square feet)

Total acreage: 8.85 AC
Describe Proposed Conditional Use:

Staff Use Only

Land Lot 111 of the 5th District, Carroll County Tax Map 153 Parcel 0393



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VARIANCE APPLICATION

Authorization of Property Owner

THIS FORM TO BE COMPLETED ONLY IF APPLICANT AND OWNER ARE NOT THE SAME PERSON(S).

Applicant is person submitting the variance application. Owner is the property owner.

(Please type or legibly print)

Property Address: 8.85AC Hwy. 61

Applicant Name: Jackie D. Couch

Address: 3691 Carrollton Villa Rica Hwy.

City: Carrollton State: GA Zip: 30116

Phone: (770) 328 - 8632

TRAINER MEDICAL CENTER (Owner's Name), 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 a Variance under the Ordinances of Carroll County:

I affirm that I am the owner of the property that is the subject of the attached application, as shown in the records of Carroll County, Georgia. I authorize the person named above to act as applicant in the pursuit of the variance application.

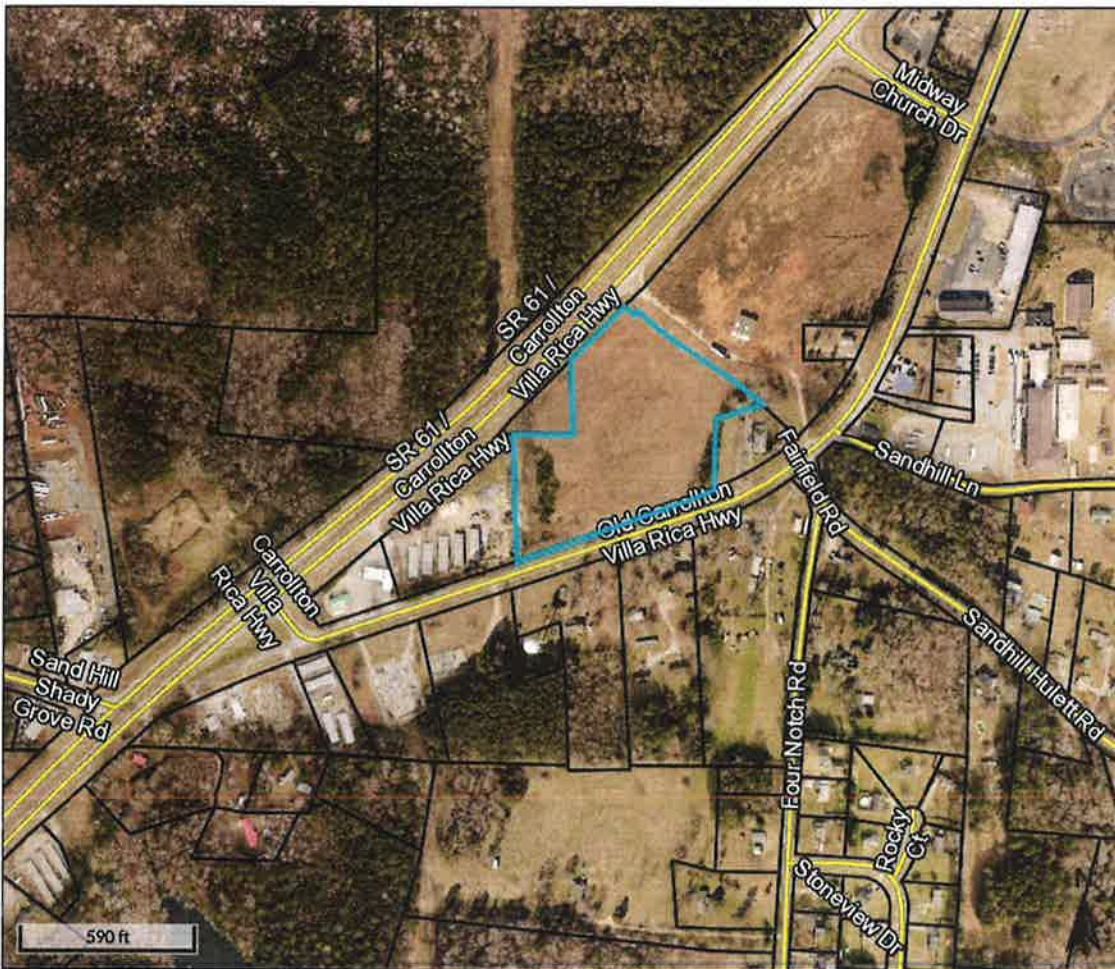
FURTHER AFFIANT SAYETH NOT.

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

This 6 day of June, 2022


AFFIANT (Owner's signature)





Overview



Legend

- Parcels
- Roads

Parcel ID 153 0393
 Class Code Exempt
 Taxing District COUNTY
 Acres 8.85

Owner TANNER MEDICAL CENTER INC
 705 DIXIE ST
 ATTN:TIM MCDONALD
 PROPERTY MANAGER
 CARROLLTON, GA 30117

Last 2 Sales			
Date	Price	Reason	Qual
12/30/2010	\$626376	EG	U
n/a	0	n/a	n/a

Physical Address 61 HWY
 Assessed Value Value \$442500

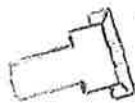
(Note: Not to be used on legal documents)

Date created: 6/7/2022
 Last Data Uploaded: 6/6/2022 6:20:50 PM

Developed by Schneider
 GEOSPATIAL

Joker Creek

Georgia Transmission Easement
100' easement



GA Hwy 61
Variable RW

19 P/O
Approx. 375'

Janet Hyde

Conditional use permit

