

Amendment Application

nt ion	Name: Julia and Christopher Robinso	n					
Applicant Information	Address: 3519 Sunderland Way						
Ap Info	Phone: 770-530-9847	Fax:	Email: juliedrob87@gm	nail.com			
rion	Owner's Name: Julia & Christopher Robinson; New Ashford, LLC						
Owner Information	Owner's Address: 3519 Sunderland Wa	ay Brookhaven, Ga 30319 ;	1918 Johnson Ferry Rd. I	Brookhaven, GA 3031	.9		
C	Phone:	Fax:	Email:				
	Property Address: 1930 Johnson Ferry I	Rd Brookhaven, GA 30319		Parcel Size: .15 acre			
uo	Parcel ID: 18 305 01 115						
Property Information	Current Zoning Classification: RM-14						
Property Informat	Requested Zoning Classification: RS-100)					
	1. Is the zoning proposal in conformity	with the policy and intent	of the comprehensive pla	n?			
	Yes 2. Will the zoning proposal permit a use	e that is suitable in view of	the use and development	t of adjacent and near	·bv		
	properties? Yes	e triat is suitable in view of	and development	or adjucent and near	~ y		
	B. Will the affected property of the zon	ing proposal have a reason	able economic use as cur	rently zoned?			
aire	No Little College Coll						
ionna	 Will the zoning proposal adversely at No 	ffect the existing use or usa	bility of adjacent or nearl	by property?			
Questionnaire	5. Are other existing or changing condit	tions affecting the existing	use or usability of the dev	relopment of the prop	erty which		
J	give supporting grounds for either app						
	No						
	5. Will the zoning proposal adversely at	ffect historic buildings, sites	, districts, or archaeologic	cal resources?			
	No 7. Will the zoning proposal result in a u	se which will or could caus	an evcessive or hurdens	ome use of existing s	treets		
	transportation facilities, utilities or sch		an excessive of burdens		tieets,		
	No						
	To the best of my knowledge, this a determined to be necessary, I unde						
avít	of Brookhaven Zoyını Ordinance.						
Affidavit	Applicant's Name:	Julia Polanson Co	astopher Pobinson	1	Date: 0 30 3		
,	Applicant's Signature:	- ()		-	Date: 04 30		
	Sworn to and subscribed before me th	is 30 Day	of flene	, 20, 2, 3			
2	Notary Public: Kepecca fe	exxy			2		
Notary	Signature:	216	pekecoa	July 1			
	My Commission Expires: ///arj	18 2024 6		View	SCC,		
Fees	Application Fee 🛭 Sign Fee (\$135 x	number required)* – 🗖 Le	gal Fee (\$10)	o/ No	C IT		
ιτ	Fee: \$ Payment: 🗖 Ca	ash Check CC	Date:	8 6	2		
* (One sign is required per street from	tage and/or every 500 f	eet of street frontage	Bire &	c / /		
				MANUEL GEO	RGIA		



Property Owner(s) Notarized Certification

The owner and petitioner acknowledge that this Zoning Map Petition application form is correct and complete. By completing this form, all owners of the subject property certify authorization of the filing of the application for zoning amendment, and authorization of an applicant or agent to act on their behalf in the filing of the application including all subsequent application amendments.

g all subsequent application amendments.						
Signature:		Date: 6/30/2023				
Address: 3519 Sundwand Way C	ity, State: Prooknown, 64	Zip: 30319				
Phone: 710 - 530-9847						
William Control of the Control of th						
Notary Public: Lepocea flet	COBB W	CON CL				
Signature: Therang I	elle Cur	Paper 30 23				
10 1171	City, State: Afforda GA	Zip: 3034/				
MM2 11-1 1927						
	day of	, 20				
Notary Public:	•					
Signature		Date:				
	City State:	Zip:				
	icity, state.					
Phone:						
Sworn to and subscribed before me this	day of	, 20				
Notary Public:						
	Signature: Address: 3519 Swndwland Way Phone: 710 - 530 98 41 Sworn to and subscribed before me this Notary Public: Address: 456 Penduluse Jud Phone: 770 - 458 - 193 Sworn to and subscribed before me this Notary Public: Signature: Address: Phone: Sworn to and subscribed before me this Sworn to and subscribed before me this Sworn to and subscribed before me this	Signature: Address: 3517 Swhamand Way Phone: 710 - 530 98 41 Sworn to and subscribed before me this Signature: Address: 5456 Facety Fee Wicity, State: Affords FA Phone: 710 - 458 - 932 Sworn to and subscribed before me this				



Property Owner(s) Notarized Certification

The owner and petitioner acknowledge that this Zoning Map Petition application form is correct and complete. By completing this form, all owners of the subject property certify authorization of the filing of the application for zoning amendment, and authorization of an applicant or agent to act on their behalf in the filing of the application including all subsequent application amendments.

	Signature:		Date:06 29 2023
	Address: 8902 N. Meridian ST. Suite 205	City, State: Indianapolis, IN	Zip: 46260
	Phone: (317) 419-6205		
Owner :able)	Sworn to and subscribed before me this0	29th day of June	, 20 <u>23</u>
Property Owner (If Applicable)	Notary Public: Amy & Covey		
	Signature: any R Coul	χ	Date: 6/29/23
	Address: 8902N Mendian St Skil	City, State: (Napl (NY674)	Zip:
T i -	Phone: 317-841-9900		
Property Owner (If Applicable)	Sworn to and subscribed before me this	29th day of June	, 2023
Propert (If App	Notary Public:	Amy R. Covey Commission Number: NP0723673 Hendricks County Expiration Date: Nov. 21, 2027	
	Signature:		Date:
	Address:	City, State:	Zip:
wner able)	Phone:		
Property Owner (If Applicable)	Sworn to and subscribed before me this	day of	, 20
P.	Notary Public:		



Applicant/Petitioner Notarized Certification

Petitioner states under oath that: (1) he/she is the executor or Attorney-In-Fact under a Power-of- Attorney for the owner (attach a copy of the Power-of-Attorney letter and type name above as "Owner"); (2) he/she has an option to purchase said property (attach a copy of the contract and type name of owner above as "Owner"); (3) he/she has an estate for years which permits the petitioner to apply (attach a copy of lease and type name of owner above as "Owner").

	$\cap \cap$	1		
	Signature:	<		Date: 6/30/2023
er	Address: 3519 Sundiviand way		City, State: Brook haven, 6A	Zip: 30319
tion	Phone: 770 - 530 -9647			
Applicant / Petitioner	Sworn to and subscribed before me this	3	aday of June	, 20 <u>_23</u>
Appli	Notary Public:			
	~ 2			
	Signature: Checoco ()	ck,	Lef 11	Date: 10-30-2
ند		City, St	ate: Affanta 6A	Zip: 3034/
gen	Phone: 170 -458-1922	7		
Attorney / Agent	Sworn to and subscribed before me this	3	day of June	,20 <u>23</u>
Attorr	Notary Public: Jubacca July	Lfg	REBECC 1600 CP	
			O CEOPGIA	



Campaign Disclosure Ordinance

Campaign Disclosure Ordinance

Please read the law and complete the Campaign Disclosure Statement on the following page if you are requesting a Rezoning, Concurrent Variance, or Conditional Use.

GA Citation/Title

GA Code 36-67A-3, Disclosure of campaign contributions *38069 Code, 36-67A-3

CODE OF GEORGIA TITLE 36. LOCAL GOVERNMENT PROVISIONS APPLICABLE TO COUNTIES AND MUNICIPAL CORPORATIONS CHAPTER 67A. CONFLICT OF INTEREST IN ZONING ACTIONS

(Current through 2000 General Assembly)

36-67 Disclosure of campaign contributions.

- a) When any applicant for rezoning action has made, within two years immediately preceding the filing of that applicant's application for the rezoning action, campaign contributions aggregating \$250.00 or more to a local government official who will consider the application, it shall be the duty of the applicant to file a disclosure report with the governing authority of the respective local government showing:
 - 1) The name and official position of the local government official to whom the campaign contribution was made; and
 - 2) The dollar amount and description of each campaign contribution made by the applicant to the local government official during the two years immediately preceding the filing of the application for the rezoning action and the date of each such contribution.
- b) The disclosures required by subsection (a) of this Code section shall be filed within ten days after the application for the rezoning action is first filed.
- c) When any opponent of a rezoning action has made, within two years immediately preceding the filing of the rezoning action being opposed, campaign contributions aggregating \$250.00 or more to a local government official of the local government which will consider the application, it shall be the duty of the opponent to file a disclosure with the governing authority respective local government showing:
 - 1) The name and official position of the local government official to whom the campaign contribution was made; and
 - 2) The dollar amount and description of each campaign contribution made by the opponent to the local government official during the two years immediately preceding the filing of the application for the rezoning action and the date of each such contribution.
- d) The disclosure required by subsection (c) of this Code section shall be filed at least five calendar days prior to the first hearing by the local government of any of its agencies on the rezoning application.

(code 1981, 36-67A-3, enacted by Ga. L. 1986, p. 1269, 1; Ga. L. 1991, p. 1365, 1; Ga. L. 1993, p. 91, 36.)

Official Code of Georgia Annotated Copyright 1982 – 2000 State of Georgia.



Campaign Disclosure Statement

Have you, within the two years immediately preceding the filing of this application, made campaign contributions aggregating \$250.00 or more to a member of the City of Brookhaven City Council or a member of the City of Brookhaven Planning Commission?

□ Y	es	ı⊈No		α			
		Signature:	A	//	1/	_/_	
	Applicant , Owner	Address: 3	sig Sunder	land way Bu	ockhaun, 6A	30319	
	App	Date: 6/21	12023				بصرميي

If you answered yes above, please complete the following section:

Date	Government Official	Official Position	Description	Amount
=				

PRE-APPLICATION MEETING FORM



LAND USE PETITIONS & VARIANCE APPLICATIONS

4362 Peachtree Road, Brookhaven, GA 30319 Phone: 404-637-0500 • Fax: 404-637-0501 www.BrookhavenGA.gov

Purpose & Process

A Pre-Application Meeting provides you the opportunity to present a conceptual plan and letter of intent to a representative of the Community Development Department. This meeting benefits you, the applicant, by receiving general comments on the feasibility of the plan, the process(es)/procedure(s) and fees required to process and review an application. To schedule a meeting, contact a member of the Planning and Zoning Division by calling (404) 637-0500 or via email at Planning@BrookhavenGA.Gov. This form will be completed during the pre-application meeting and must be submitted with the application for the submittal to be deemed complete.

Applicant Name	Julia & Christopher Robinson	Applicant Email	Juliedrob87@gmail.com
Applicant Phone	770-530-9847		
Site Address		Parcel Size	.15 Acres
Tax Parcel #	18-305-01-115	City Council District	
Existing Zoning & Case	RM-14	Proposed Zoning District	RS-100
-		Proposed Use:	Residential
Overlay District	And and the	Character Area	Sunderland/Johnson Ferry

	Request		Fees
\boxtimes	Rezoning		
\boxtimes	with Concurrent Variances	Application Base	\$1310
	Special Land Use Permit	Additional Request + (2)	\$0
	Board of Appeals Variance	Public Notice Sign x (2)	\$0
	Administrative Variance	Public Notice Advertisement	\$0
	Stream Buffer	Estimated Total	\$1310
	Sign	·	
	Deadlines and I	Public Hearing Dates	
Арі	olication Deadline (If Applicable)	July 5 th , 2023	
Cor	mmission or Board Meeting Date (If Applicable)	Sept 6th, 2023	
	Additio	onal Studies	
	Trip Generation	☐ Traffic Impact Study	
	Development of Regional Impact Review	☐ Environmental Impact Review	

Proposal Desc	ription		
Rezoning the stransitional but	subject property front offer from \$0 ft to 2	om RM-14 to RS-100 with a	concurrent variance to reduce the
Applicant Signature	AL	11/	Date: 7/1/2023

PRE-APPLICATION MEETING FORM



LAND USE PETITIONS & VARIANCE APPLICATIONS

4362 Peachtree Road, Brookhaven, GA 30319
Phone: 404-637-0500 • Fax: 404-637-0501
www.BrookhavenGA.gov

Applicant Signature: _			Date:	
Planner Signature:	Anonda Smith	Date:	4-29-2022	

2022171598 DEED BOOK 30689 Pg 520 Filed and Recorded: 12/8/2022 12:46:00 PM

Recording Fee: \$25.00

Prepared By: 6750636435

Tax Parcel ID: 18 305 01 068

QUITCLAIM DEED

THIS INDENTURE WITNESSETH, that New Ashford, LLC, an Indiana limited liability company ("Grantor"), QUITCLAIMS to Christopher Robinson and Julia E. Duffy, each a resident of Georgia ("Grantee"), for the sum of Zero Dollars (\$0.00) and other good and valuable consideration, the receipt and sufficiency of which hereby are acknowledged, all of Grantor's right, title and interest in the real estate located in DeKalb County, in the State of Georgia, as more particularly described on Exhibit A attached hereto and made a part herein by reference, including any improvements located thereon (the "Real Estate").

Grantor makes no representations, warranties or covenants, express or implied, of any nature or kind in connection with the transfer of the Real Estate.

IN WITNESS WHEREOF, Grant September 15, 2022.	for has executed this Deed to be effective as of
Witness Laul a. Smirt Witness	GRANTOR: NEW ASHFORD, LLC, an Indiana limited liability company By: BH MANAGER, LLC, an Indiana limited liability company, it's Manager By: Andrew J. Held, Manager
appeared Andrew J. Held, the Manager of BH	Ablic, on this day of fine the 2022, personally Manager, LLC, an Indiana limited liability company, the wledged to me that he executed said instrument for the act of said limited liability company. Notary Public - Written Notary Public - Printed
My Commission Expires:	My County of Residence:
I affirm under penalties for periory that I ha	ave taken reasonable care to redact each Social Security

I affirm, under penalties for perjury, that I have taken reasonable care to redact each Social Security number in this document, unless required by law. /s/ Brian R. Bouggy

Send tax statements to: Christopher Robinson and Julie E. Duffy, 3519 Sunderland Way NE, Atlanta, Georgia 30319-1953

This instrument prepared by and should be returned to: Brian R. Bouggy, Densborn Blachly LLP, 500 East 96th Street, Suite 100, Indianapolis, IN 46240.

2022171598 DEED BOOK 30689 Pg 522 Debra DeBerry Clerk of Superior Court DeKalb County, Georgia

EXHIBIT A

LEGAL DESCRIPTION

ALL THAT TRACT OR PARCEL OF LAND LYING AND BEING IN LAND LOTS 302 AND 305 OF THE 18TH DISTRICT, DEKALB COUNTY, GEORGIA, BEING LOT 40, BLOCK A, SUNDERLAND SUBDIVISION UNIT 2 AS PER PLAT RECORDED IN PLAT BOOK 54, PAGE 87, DEKALB COUNTY, GEORGIA RECORDS WHICH PLAT IS INCORPORATED HEREIN BY REFERENCE AND MADE A PART OF THIS DESCRIPTION. SAID PROPERTY BEING KNOWN AS 3519 SUNDERLAND WAY NORTHEAST ACCORDING TO THE PRESENT SYSTEM OF NUMBERING PROPERTY IN DEKALB COUNTY, GEORGIA.

SAID TRACT OR PARCEL OF LAND CONTAINS 22,706 SQUARE FEET.

TOGETHER WITH ALL THAT TRACT OR PARCEL OF LAND LYING AND BEING IN LAND LOT 305 OF THE 18TH DISTRICT, DEKALB COUNTY, GEORGIA, BEING MORE PARTICULARLY DESCRIBED AS FOLLOWS:

BEGINNING AT THE 1" CRIMP TOP FOUND ON THE NORTHEASTERLY 100' RIGHT-OF-WAY OF JOHNSON FERRY ROAD AS LOCATED AT THE SOUTHEAST CORNER OF LOT 40, BLOCK A, SUNDERLAND SUBDIVISION UNIT 2 AS PER PLAT RECORDED IN PLAT BOOK 54, PAGE 87, DEKALB COUNTY, GEORGIA RECORDS; THENCE RUNNING N 14°24'11"E AND LEAVING SAID RIGHT-OF-WAY, ALONG THE SOUTHEASTERN LINE OF SAID LOT, FOR A DISTANCE OF 135.00' TO A RE-BAR SET AT THE NORTHEAST CORNER OF SAID LOT; THENCE RUNNING S76°37'49"E FOR A DISTANCE OF 50.01' TO A RE-BAR SET; THENCE RUNNING SI4°24'11"W FOR A DISTANCE OF 140.19' TO A RE-BAR SET ON SAID RIGHT-OF-WAY LINE; THENCE RUNNING, ALONG SAID RIGHT-OF-WAY LINE N70°41'49"W FOR A DISTANCE OF 50.18' TO THE PLACE OR POINT OF BEGINNING;

SAID TRACT OR PARCEL OF LAND CONTAINS 6,880 SQUARE FEET.

PT-61 (Rev. 2/18) To be file	led in	DEKALB (COUNTY		PT-61 04	14-2022-027719
SECTION A - SELLER'S INFORM	ATION (Do not u	se agent's informat	tion)		SECTION C - TAX COMPU	TATION
SELLER'S BUSINESS / ORGANIZATION / OTHER NAME New Ashford, LLC				Exempt Code If no exempt code	enter NONE	Company to Individual Transfer
MAILING ADDRESS (STREET & NUMBER) 8902 North Meridian Street Suite 205					consideration received by seller A if actual value unknown	\$0.00
CITY, STATE / PROVINCE / REGION, ZIP CODE, COUNTRY DATE OF SALE Indianapolis, IN 46260 USA 11/21/2022				1A. Estimated fair Personal prop	market value of Real and arty	\$0.00
SECTION B – BUYER'S INFORMATION (Do not use agent's information)				2. Fair market valu	e of Personal Property only	\$0.00
BUYER'S LAST NAME FIRST NAME MIDDLE Robinson Christopher			Amount of liens and encumbrances not removed by transfer		\$0.00	
MAILING ADDRESS (Must use buyer's address for tax billing & notice purposes) 3519 Sunderland Way NE			4. Net Taxable Value (Line 1 or 1A less Lines 2 and 3)		\$0.00	
CITY, STATE / PROVINCE / REGION, ZIP COI Atlanta, GA 30319-1953 USA	DE, COUNTRY	Check Buyers Inte () Residential (() Agricultural () Commercial	5. TAX DUE at .10 per \$100 or fraction thereof (Minimum \$1.00)		\$0.00
S	ECTION D - PRO	PERTY INFORMAT	ION (Location	of Property (Street	, Route, Hwy, etc))	
HOUSE NUMBER & EXTENSION (ex 265A) 1918		n Ferry Road	•	OST DIRECTION		SUITE NUMBER
COUNTY	CITY (IF APF	PLICABLE)		MAP & PARCEL NUMBER		ACCOUNT NUMBER
DEKALB Brookhaven			18-305-01-068			
TAX DISTRICT GMD	1	AND DISTRICT	ACRES	3	LAND LOT	SUB LOT & BLOCK
	SEC	TION E - RECORDI	ING INFORMA	TION (Official Use (Dniy)	
DATE	DEED BOOK	(DEED PAGE		PLAT BOOK	PLAT PAGE

ADDITIONAL BUYERS
Duffy, Julia E.