PARCEL #5100-065 THE KROGER CO.



SPECIAL USE PERMIT APPLICATION

For All Uses

Except Collective Residences; Hotel Motel and Extended-Stay Hotel and Places of Worship)

City of Snellville, Georgia **Department of Planning & Development**

2342 Oak Road, 2nd Floor

Snellville, Georgia 30078

	° 2023
CASE # SUPOF	SNELL
PLANNING &	SNELLVILLE 10-27-202

DATE RECEIVED AY 1 7 2022

Phone //0.985.3515 Fax /	/0.765.3331	www.snellville.org		DEVELOPMENT
Applicant is: (check one)		y Owner y for Property Owner y Owner's Agent	Property Owner (if no additional property owners	ot the applicant): □ check here if
Split Silk Properties, LLC				
Name (please print) Owner			Name (please print)	
Title			Title The Kroger CO	
Corporate Entity Name P.O. Box 1725			Corporate Entity Name 1014 Vine Street	
Mailing Address Loganville, GA 30052			Mailing Address Cincinnati, OH 45202-	1141
City, State, Zip Code 678-439-1776			City, State, Zip Code 513-762-4000	
Phone Number (wk) splitsilkproperties@gmail.com		(cell)	Phone Number (wk)	(cell)
Email Address			Email Address	
Requested Special Use (see Us	ses Requiring a	Special Use Permit):^	1ultiple Family Dwelling 206-3.	I E
This SUP application is also be	ing filed along	with applications for: $oxtime{oxtime}$	Rezoning Land Use Plan	n Amendment None
Present Zoning District Classif Proposed Zoning District Clas	fication: <u>Gene</u> sification: <u>Mix</u> e	eral Business Present ed Use Propose	Future Land Use Classification: ed Future Land Use Classification	: <u>Hwy 78 East Activity Center/No</u> d on: <u>No Change</u>
Property Street Address: 1000	Athens Hwy L	oganville, GA 30052	Acreage: 22.85	Tax Parcel No.: 5 100 065
APPLICATION FEES: Special Use F	Parmit Applica	tion \$ 500 (without	t rezoning); or \$250 with rezo	ning

- Public Notice Sign
- \$ 75 (single-sided) or \$125 (double-sided) per parcel, per road frontage
- Adjoining Property Owner Notice \$ 15 (per adjoining property X 2 public hearings)

Special use permits may not be used for securing early zoning for conceptual proposals which may not be undertaken for more than 6 months from the date the application is submitted. A special use permit application will be considered only if it is made by the owner of the property or their authorized agent.

SPECIAL USE: A use which while not permitted as a matter of right may be allowed within a given zoning district when meeting standards as prescribed by this UDO. Special land uses have operational characteristics and/or impacts that are significantly different from the zoning district's principal authorized uses and therefore require individual review pursuant to the standards and criteria set forth in this UDO.

UDO Sec. 103-10.1. General: Special use permits are intended as a means for the City Council to authorize certain uses that are not permitted by-right in a zoning district. Special use permits may be subject to meeting specific standards by Chapter 200 Article 6 (Use Provisions), but still require individual review by City Council because of the increased potential for incompatibility with its immediate neighborhood.

CERTIFICATIONS

APPLICANT'S CERTIFICATION

The undersigned below does hereby, swear or affirm under penalty of perjury under the laws of the State of Georgia, is authorized to make this application for a Special Use Permit and that the statements and documents submitted as part of this application are true and accurate to the best of my knowledge or belief. The undersigned is aware that no application or re-application affecting the same land shall be acted upon within six (6) months from the date of last action by the Mayor and Council.

I, the undersigned applicant, understand and agree that the Special Use Permit, if approved, shall automatically terminate if the event that this property is sold, transferred or otherwise conveyed to any other party, or the business which operates the special use is sold, transferred, or otherwise conveyed or discontinued.

business which operates the s	pecial use is solu, transferred, or ourc	wise conveyed or discontinue
Signature of Applicant	5/11/2023 Date	TH PARA
Jeff Timler, Split Silk Propertie	es, LLC - Owner	Affiy Notary Seel
Type or Print Name and Title		
Leth Pan Signature of Notary Public	5 17/23 Date	ON CONTINUES
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PROPERTY OWNER'S CERTIFICATION

☐ Check here if there are additional property owners and attach additional "Owner's Certification" sheets.

Signature of Owner Date

Type or Print Name and Title

Robert T. Lanc

Signature of Notary Public

1/6/23 Date Affix Notary Seal

SHERRY GOFORTH Notary Public, State of Ohio My Commission Expires July 23, 2024

CONFLICT OF INTEREST CERTIFICATIONS FOR SPECIAL USE PERMIT

	The undersigned below, making application for a Special Use Permit, has complied with the Official Code of Georgia Section 36-67A-1, et. seq., Conflict of Interest in Zoning Actions, and has submitted or attached the required information on forms provided.				
	☐ check here if there are additional property owners as sheets.	nd attach additional "Conflict of Interest Certification"			
1	Janile 5/1/2023	Jeff Timler, Split Silk Properties, LLC - Owner			
_	Signature of Applicant Date	Type or Print Name and Title			
	Signature of Applicant's Attorney or Representative Date Att Par 5/17/23 Signature of Notary Public Date	Type or Print Name and Title Fith Notary Seal ON COUNTY			
	DISCLOSURE OF CAMPAIGN CONTRIBUTIONS				
	Have you, within the last two (2) years immediately preceding the filing of this application, made campaig contributions aggregating \$250.00 or more or made gifts having in the aggregate a value of \$250.00 or moto any member of the Mayor and City Council or any member of the Snellville Planning Commission?				
	☐ YES X NO YOUR NAME: Jeff	Timler, Split Silk Properties, LLC - Owner			
	If the answer above is YES, please complete the following	g section:			
1	NAME AND OFFICIAL CONTRIB	HILLONS DAIF CONTRIBUTION			

NAME AND OFFICIAL POSITION OF GOVERNMENT OFFICIAL	CONTRIBUTIONS (list all which aggregate to \$250 or More)	DATE CONTRIBUTION WAS MADE (Within the last two years)

] Check here and attach additional sheets	f necessary to disclose or o	describe all contributions or gifts.
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AUTHORIZATION TO INSPECT PREMISES

With the signature below, I authorize the staff of the Department of Planning and Development of the City of Snellville, Georgia to inspect the premises, which are the subject of this Special Use Permit application.

I swear and affirm that the information contained in this application is true and accurate to the best of my knowledge and belief.

Signature of Owner or Agent

Date

Robert 7. L Type or Print Name and Title Affix Notary Seal

Ci (Natama Bublic

7/6/23 Date SHERRY GOFORTH Notary Public, State of Ohio My Commission Expires July 23, 2024