

CITY OF ALPHARETTA

PUBLIC HEARING APPLICATION

FOR OFFICE USE ONLY

Case #: _____

PH #: _____

Property Taxes & Code Violations Verified

Fee Paid Initial: _____

COMMUNITY DEVELOPMENT DEPARTMENT

2 PARK PLAZA

ALPHARETTA, GA 30009

1. This page should be the first page in each of your completed application packets.
2. It is preferred that all responses be typed. Illegible applications will not be accepted.
3. Prior to signing and submitting your application, please check all information supplied on the following pages to ensure that all responses are complete and accurate. Incomplete applications will not be accepted.
4. Payment of all applicable fees must be made at the time of application. Payment may be made via cash, credit card (American Express, Master Card or Visa), or check made payable to "City of Alpharetta." Please note that a 3% convenience fee will be added to all credit card transactions.
5. Applications will be accepted on the designated submittal dates between the hours of 8:30 AM and 3:30 PM.
6. If you have any questions regarding this form, please contact the Community Development Department by calling 678-297-6070.

Contact Information:

Contact Name: Michelle Dorminey Telephone: 770-448-7446 xt 115

Address: 6334 Buford Hwy Suite: _____

City: Norcross State: GA Zip: 300071 Fax: _____

Mobile Tel: 770-851-2293 Email: michelle@A1Signs.com

Subject Property Information:

Address: 210 South Main Street Current Zoning: C-2

District: 1st Section: 2nd Land Lot: 0695 Parcel ID: 12 258406950815

Proposed Zoning: _____ Current Use: Commercial strip shopping center, 50000 sq ft

This Application For *(Check All That Apply):*

- | | | |
|--|--|---|
| <input type="checkbox"/> Conditional Use | <input type="checkbox"/> Master Plan Amendment | <input type="checkbox"/> Comprehensive Plan Amendment |
| <input type="checkbox"/> Rezoning | <input type="checkbox"/> Master Plan Review | |
| <input checked="" type="checkbox"/> Variance | <input checked="" type="checkbox"/> Public Hearing | |
| <input type="checkbox"/> Exception | <input type="checkbox"/> Other <i>(Specify):</i> _____ | |

APPLICANT REQUEST AND INTENT

What is the proposed use(s) of the property?

Commercial strip shopping center

Applicant's Request (Please itemize the proposal):

A request for a variance for the purpose of installing a blade sign on the building. Due to the location of underground utilities, the only option would be to allow the installation of the Blade sign that would technically have the specifications of a monument sign.

Applicant's Intent *(Please describe what the proposal would facilitate).*

The approved variance would allow the building tenants to advertise their business as they would in any other commercial shopping center.

PROPERTY OWNER AUTHORIZATION

Property Owner Information:

Contact Name: STRS Ohio Real Estate Investments, LLC Telephone: 678-233-8520
Address: 35 Johnson Ferry Rd Suite: _____
City Marietta State: GA Zip: 30068

Authorization:

I do solemnly swear and attest, subject to criminal penalties for false swearing, that I am the legal owner, as reflected in the records of Fulton County, Georgia, of the property identified below, which is the subject of the attached Application for Public Hearing before the City of Alpharetta, Georgia.

As the legal owner of record of the subject property, I hereby authorize the individual named below to act as the applicant in the pursuit of the Application for Public Hearing in request of the items indicated below.

- | | |
|---|--|
| <input type="checkbox"/> Annexation | <input type="checkbox"/> Special Use |
| <input type="checkbox"/> Rezoning | <input type="checkbox"/> Conditional Use |
| <input checked="" type="checkbox"/> Variance | <input type="checkbox"/> Master Plan |
| <input type="checkbox"/> Land Use Application | <input type="checkbox"/> Other |

Property Owner's Authorized Applicant (if applicable):

Name of Authorized Applicant: Naomi Rizzo Telephone: 678-233-8520
Address: 35 Johnson Ferry Rd Suite: _____
City Marietta State: GA Zip: 30068

So Sworn and Attested:

Owner Signature: W. R. [Signature] as Agent for STRS Ohio
Real Estate Investments, LLC Date: 10/31/2024

Notary: J. Lemley
Notary Signature: [Signature] Date: 10/21/2024



DISCLOSURE FORM

The Official Code of Georgia Annotated requires disclosure of campaign contributions to government officials by an applicant or opponent of a rezoning or public hearing petition (O.C.G.A. 36-67A-1).

Applicants must file this form with the City of Alpharetta Community Development Department within ten (10) days after filing for rezoning or public hearing. Opponents to a rezoning or public hearing petition must file this form five (5) days prior to the Planning Commission meeting at which the subject rezoning or public hearing petition is scheduled to be heard.

Name of Applicant or Opponent: Michelle Dorminey

Subject Public Hearing Case: The Maxwell

Campaign Contribution Information:

Please provide the requested information for each contribution with a dollar amount or value of \$250 or more made within the past two (2) years to an Alpharetta Official by the individual identified above. Please use a separate form for each Alpharetta Official to whom such a contribution as been made.

If the individual identified above has made no such contributions to an Alpharetta Official within the past two (2) years, please indicate this by entering "N/A" on the appropriate lines below.

Name of Official: N/A Position: N/A

Description of Contribution: N/A Value: N/A

Description of Contribution: N/A Value: N/A

Description of Contribution: N/A Value: N/A

Description of Contribution: N/A Value: N/A

Description of Contribution: N/A Value: N/A

Campaign Contribution Information:

I do solemnly swear and attest, subject to criminal penalties for false swearing, that the information provided in this Disclosure Form is true and accurate and that I have disclosed herein any and all campaign contributions made to an Official of the City of Alpharetta, Georgia in accordance with O.C.G.A. 36-67A-1.

Signature: Michelle Dorminey

Date: 10/31/24

CITIZEN PARTICIPATION FORM - PART B

This form must be completed and submitted to the City of Alpharetta Community Development Department a minimum of twenty (20) working days prior to the scheduled Public Hearing. Failure to do so will result in cancellation of the scheduled hearing.

Public Hearing or Project Name: THE MAXWELL SIGN

Contact Name: MICHELLE DORMINEY Telephone: 770-446-7446

Please describe comments and concerns provided by any and all individuals contacted as part of the the Citizen Participation Program. If any individuals provided written correspondence, please attach copies of same to this report.

N/A

Method by which these individuals were contacted. Please mark all that apply. *Please provide samples of any and all written communications used to provide notification.*

- | | |
|------------------------------------|--|
| <input type="checkbox"/> Letter | <input type="checkbox"/> Personal Visits |
| <input type="checkbox"/> Telephone | <input type="checkbox"/> Group Meeting |
| <input type="checkbox"/> Email | <input type="checkbox"/> Other <i>(Please Specify)</i> _____ |

Attach a list of people who have been notified of this application and provided information describing the subject proposal. Please note that ALL adjoining property owners MUST be notified.

I, the undersigned, as an authorized representative of the applicant and Public Hearing item identified above, do solemnly swear and attest, subject to criminal penalties for false swearing, that the information provided in this Citizen Participation Form - Part B and in any and all documents provided in support of this report are true and accurate. I further understand that any false statements provided by representatives of the applicant as part of this report may result in penalties up to and including denial of the subject application.

Signature of Authorized Agent: Michelle Dorminey Date: 10/31/24

Print Form

SIGN VARIANCE REVIEW CRITERIA

Are there exceptional conditions pertaining to the property where the sign is to be located as a result of the property size, shape, or topography which are not applicable to other lands or structures in the area? If "yes," please explain.

Yes

No

Would the applicant be deprived of rights that are commonly enjoyed by others similarly situated? If "yes," please explain.

Yes The normal installation location is restricted by the location of utilities.
Whereas other businesses have more sign options with less restrictions.

No

Would granting the variance confer on the applicant any significant privileges which are denied to others similarly situated? If "yes," please explain.

Yes

No

Are the exceptional circumstances the result of actions of the applicant or the applicant's representatives? If "yes," please explain.

Yes

No

Is the requested variance the minimum necessary to allow the applicant to enjoy rights commonly enjoyed by others similarly situated? If "no," please explain.

Yes

No

Would granting of the variance violate more than one standard of the Unified Development Code? If "yes," please explain.

Yes

No

Would granting the variance result in allowing a sign that interferes with road or highway visibility or obstruct or otherwise interfere with the safe and orderly movement of traffic? On a separate sheet or sheets, please defend your response.

Yes

No

CITIZEN PARTICIPATION FORM - PART A

This form must be completed and submitted with the applicant's completed Public Hearing Application. Applications submitted to the City of Alpharetta without a completed Citizen Participation Form - Part A will not be accepted.

Public Hearing or Project Name: THE MAXWELL SIGN

Contact Name: MICHELLE DORMINEY Telephone: 770-448-7446

The following people will be notified of this application and provided information describing the subject proposal. Please note that ALL adjoining property owners MUST be notified. Use additional pages as needed.

SEE ATTACHED LIST

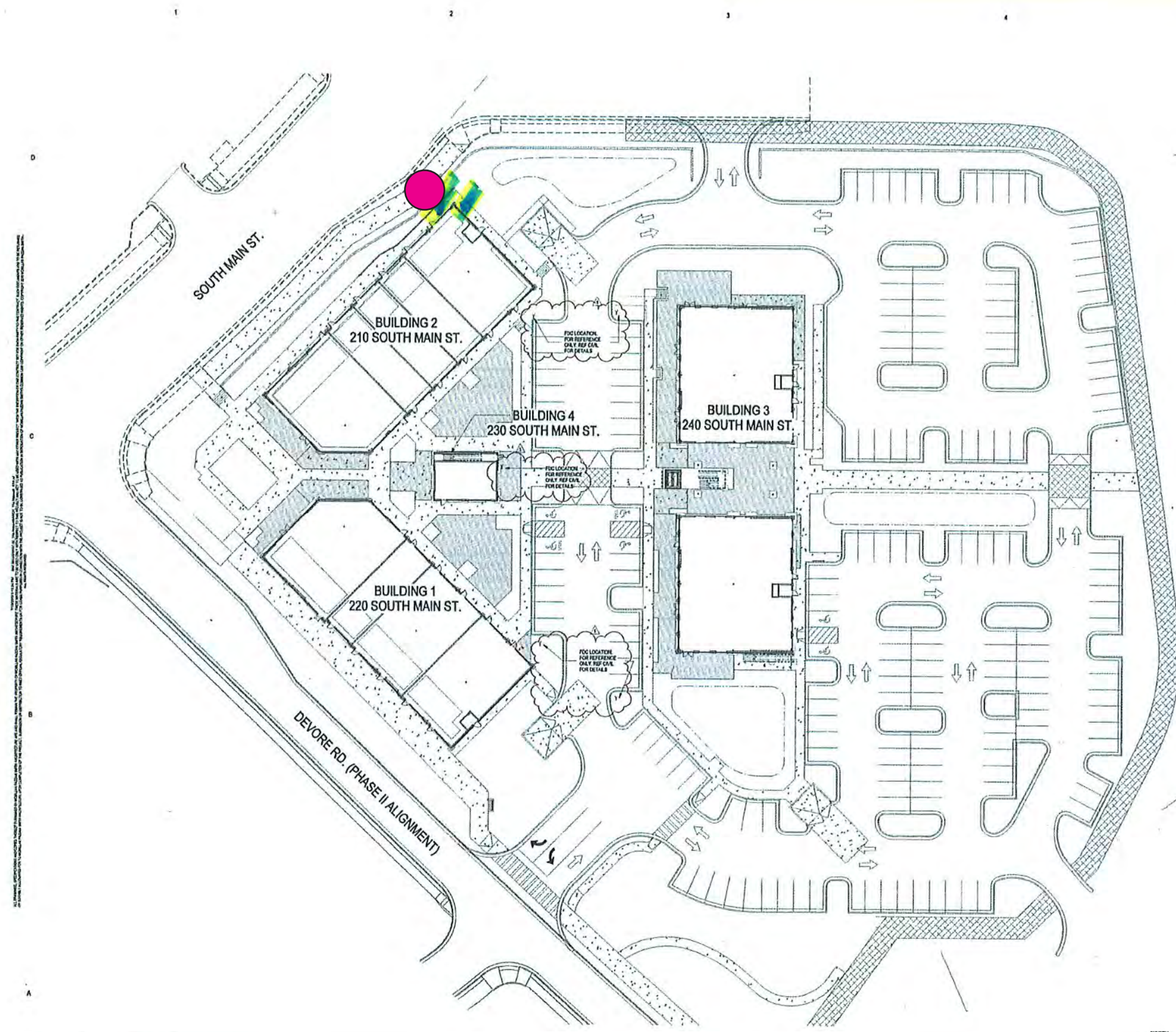
Method by which these individuals will be contacted. Please mark all that apply. *If you select "Other," please provide a description of the method of contact that will be used.*

- | | |
|------------------------------------|--|
| <input type="checkbox"/> Letter | <input type="checkbox"/> Personal Visits |
| <input type="checkbox"/> Telephone | <input type="checkbox"/> Group Meeting |
| <input type="checkbox"/> Email | <input type="checkbox"/> Other <i>(Please Specify)</i> |

SEE ATTACHED LIST

Please describe the method(s) by which these individuals will have the opportunity to respond or contact the applicant with questions or concerns about the proposal.

Email : michelle@A1signs.com



GENERAL NOTES

1. ALL WORK SHALL MEET THE MINIMUM REQUIREMENTS OF THE LATEST ADOPTED EDITIONS OF THE APPLICABLE CODES AS NOTICED ON THIS SHEET AND ALL OTHER LOCAL, STATE OR FEDERAL CODES OR REGULATIONS PERTAINING TO JURISDICTION.
2. DO NOT SCALE DRAWINGS. CLARIFY ANY DIMENSIONAL DISCREPANCIES WITH THE ARCHITECT PRIOR TO CONTINUING WITH THE WORK.
3. CLARIFY ANY COORDINATION DISCREPANCIES BETWEEN ENGINEER DRAWINGS AND ARCHITECTURAL DRAWINGS WITH THE ARCHITECT PRIOR TO CONTINUING WITH THE WORK.
4. ALL WORK LISTED, SHOWN OR IMPLIED ON THE CONSTRUCTION DOCUMENTS SHALL BE SUPPLIED AND INSTALLED BY THE GENERAL CONTRACTOR EXCEPT WHERE OTHERWISE NOTED.

SITE PLAN GENERAL NOTES

- A. FOR ALL PAVEMENT CONDITIONS SPOT ELEVATIONS PARKING DETAILS AND OTHER SITE CONDITIONS REF TO CIVIL AND LANDSCAPE DRAWINGS.
- B. DISPLAYER DATA ELEVATIONS FOR REFERENCE ONLY REF TO CIVIL FOR FINISHED SLAB ELEVATION.
- C. SEE LANDSCAPE DRAWINGS FOR TOOLING METHOD OF EDGE WALK JOISTS IS SHOWN ON THIS PLAN.
- D. SEE CIVIL DRAWINGS FOR ALL PAVEMENT STOPS AT ALL PARKING SPACES ADJACENT TO BUILDING.
- E. REFER TO ELECTRICAL AND CIVIL DRAWINGS FOR SITE LOTS (NOT SHOWN ON THIS PLAN).
- F. REFER TO MECHANICAL DRAWINGS FOR LOCATIONS AND SIZE OF ALL ROOF PENETRATIONS AND CURB REQUIRED FOR MECHANICAL EQUIPMENT.



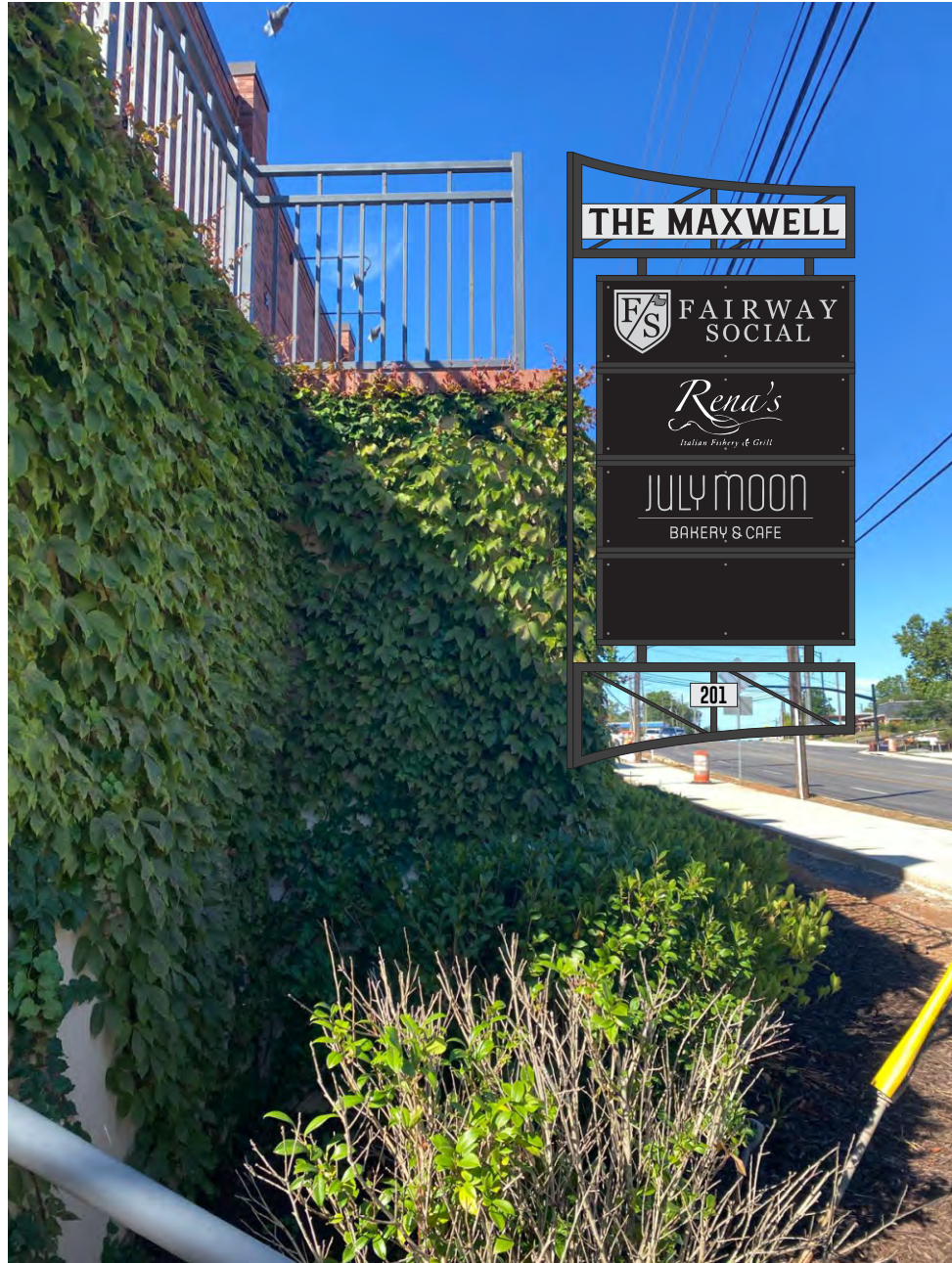
| NO. | DATE | DESCRIPTION | BY |
|-----|----------|----------------------------------|----|
| 0 | 06/15/19 | Issued for Permit & Construction | AK |
| 1 | 07/15/19 | Permit Comments Revisions | AK |

PRINCIPAL IN CHARGE: PROJECT ARCHITECT
 DRAWN BY:
 SHEET TITLE:
ARCHITECTURAL SITE PLAN

SHEET NO. PROJ. NO.

A010





| |
|--------------------------------|
| PROJECT: THE MAXWELL ASSETS |
| LOCATION: N/A |
| CLIENT: RETAIL PLANNING |
| SALESMAN: MICHELLE |
| FILE: MONUMENTS |
| ARTIST: GT |
| SCALE: N/A |
| DATE: 08/23/24 |



A1SIGNS.COM
770.448.7446
 6334 BUFORD HWY
 NORCROSS, GA 30071

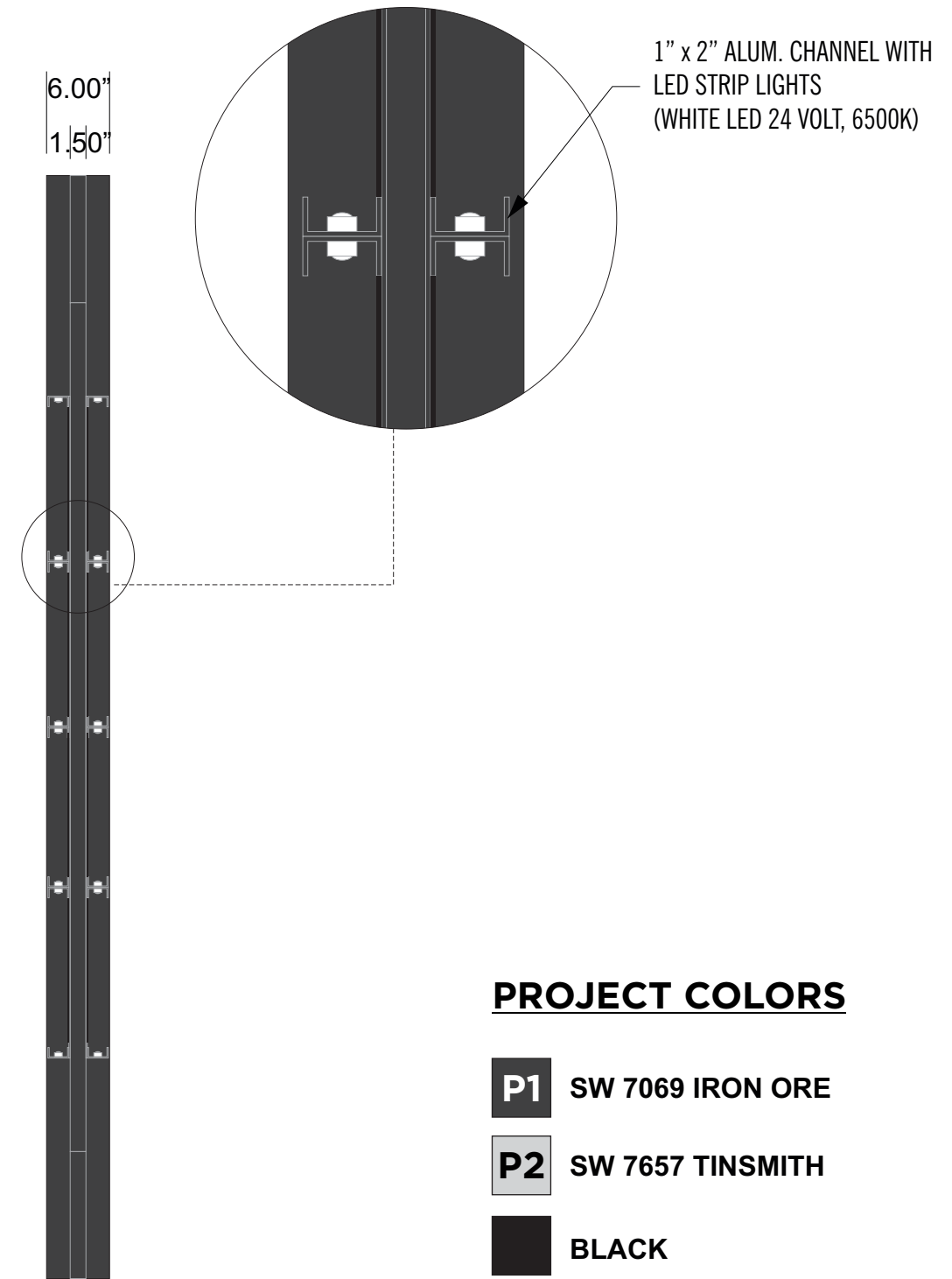
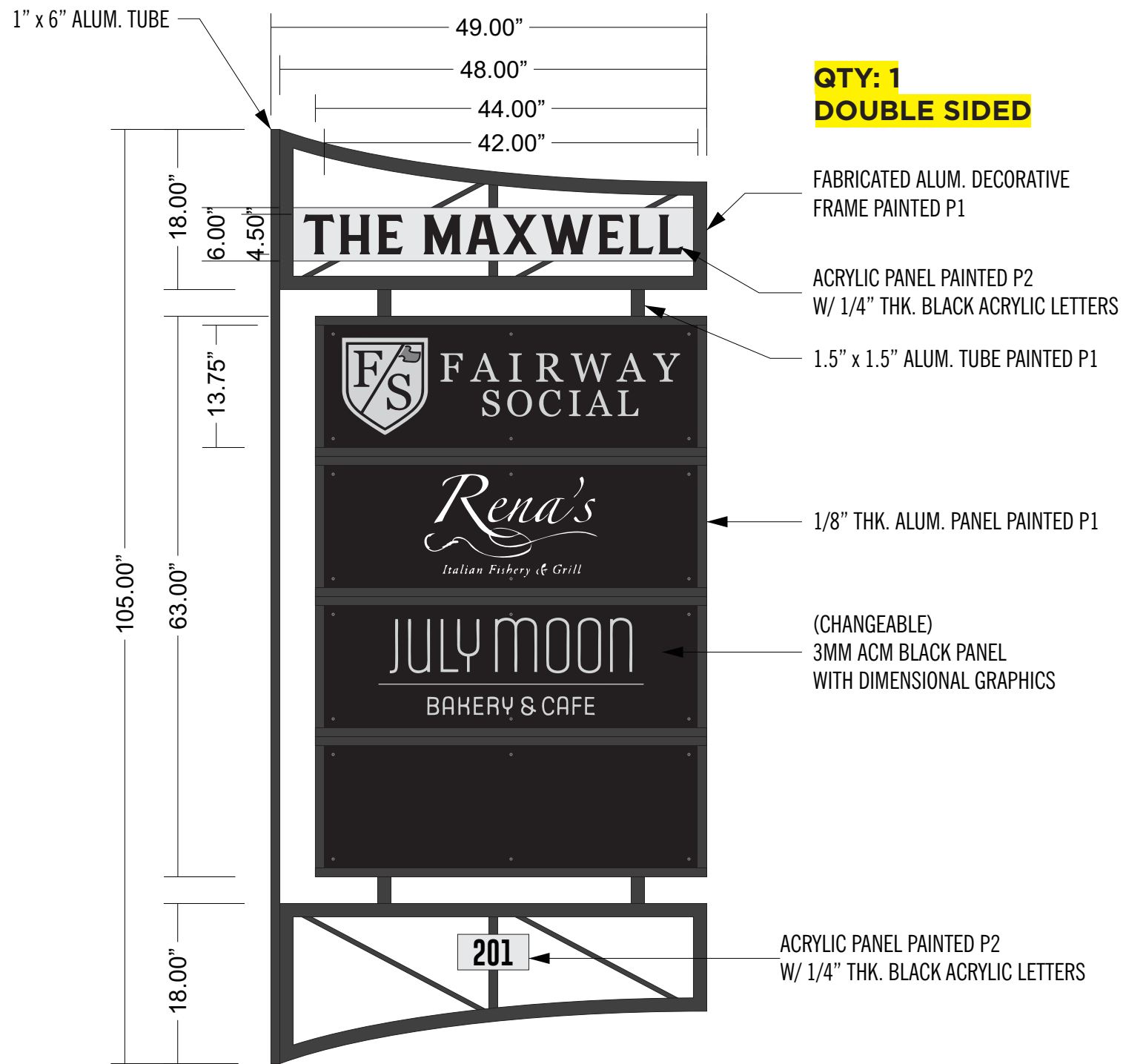
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INITIALS

DATE

PRIMARY WIRING
 OF ADEQUATE VOLTAGE
 AND CIRCUITS TO SIGN
 FURNISHED & CONNECTED
 BY CUSTOMER



| |
|---|
| PROJECT: THE MAXWELL ASSETS |
| LOCATION: N/A |
| CLIENT: RETAIL PLANNING |
| SALESMAN: MICHELLE |
| FILE: MONUMENTS |
| ARTIST: GT |
| SCALE: 3/4" = 1'-0" |
| DATE: 10/23/24 |
|  A1 SIGNS ATLANTA A1SIGNS.COM 770.448.7446 6334 BUFORD HWY NORCROSS, GA 30071 |

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INITIALS

DATE

PRIMARY WIRING OF ADEQUATE VOLTAGE AND CIRCUITS TO SIGN FURNISHED & CONNECTED BY CUSTOMER

44" X 63"=18.375 SQ.FT OF TOTAL SIGN COPY W/ 6' MAX. HEIGHT



| |
|--------------------------------|
| PROJECT: THE MAXWELL ASSETS |
| LOCATION: N/A |
| CLIENT: RETAIL PLANNING |
| SALESMAN: MICHELLE |
| FILE: MONUMENTS |
| ARTIST: GT |
| SCALE: 1-1/2" = 1'-0" |
| DATE: 10/21/24 |



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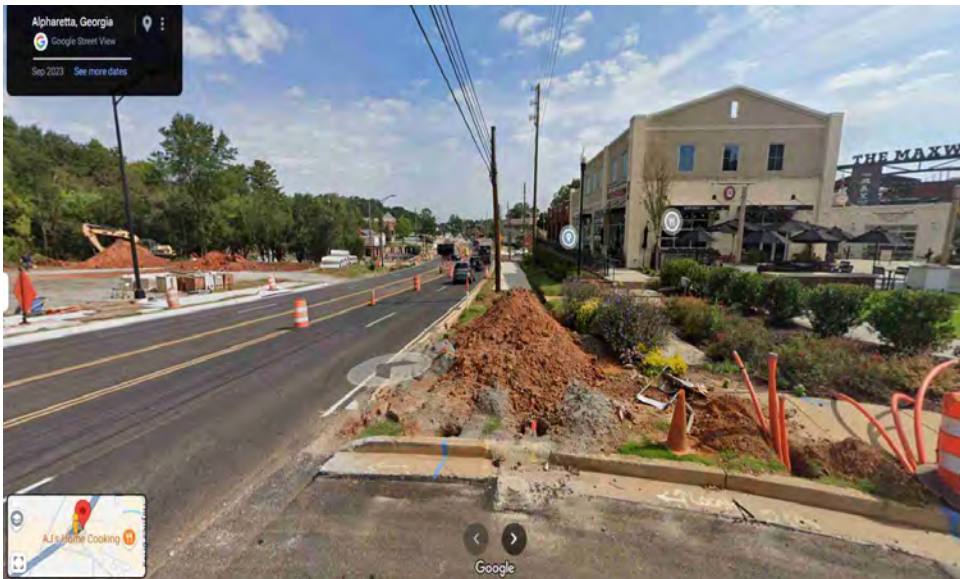
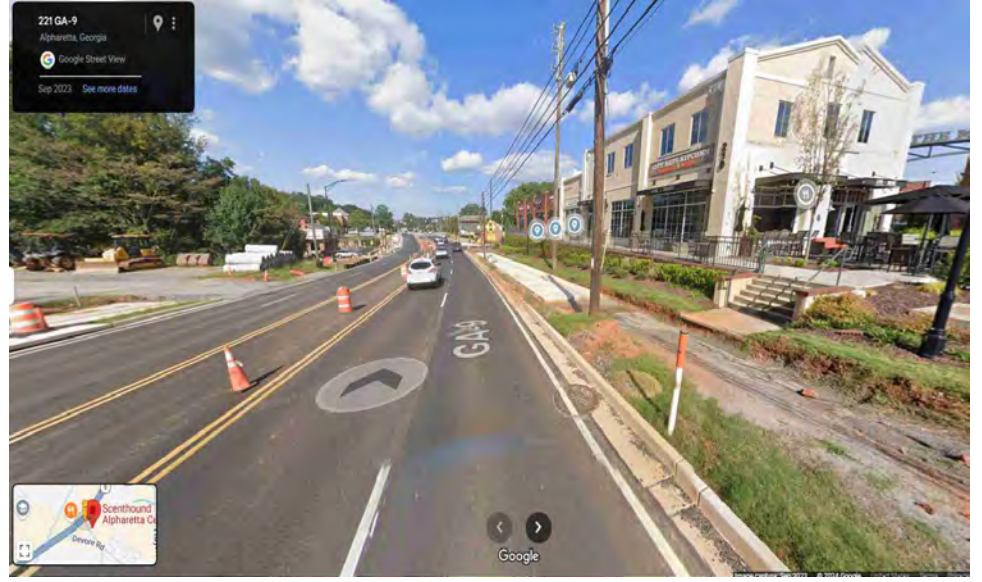
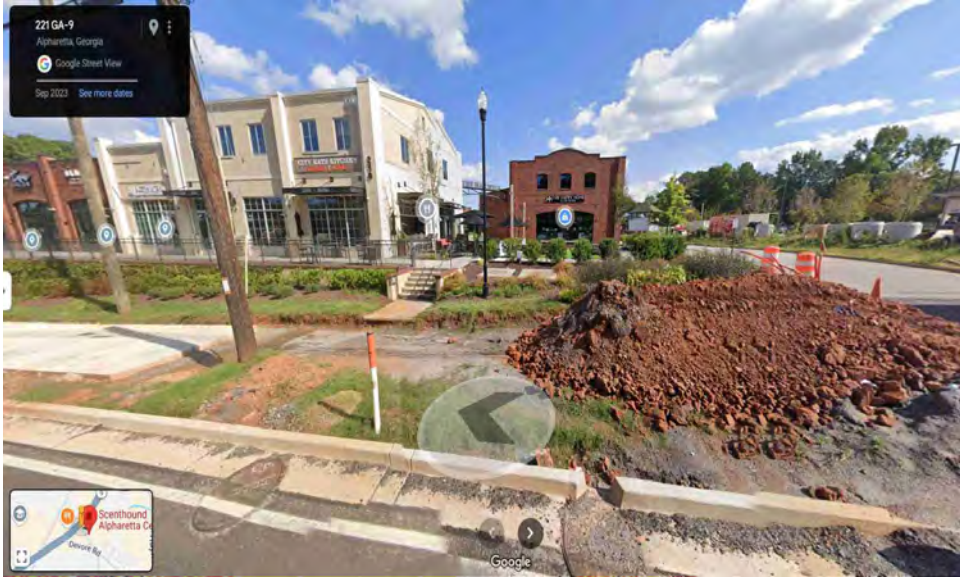
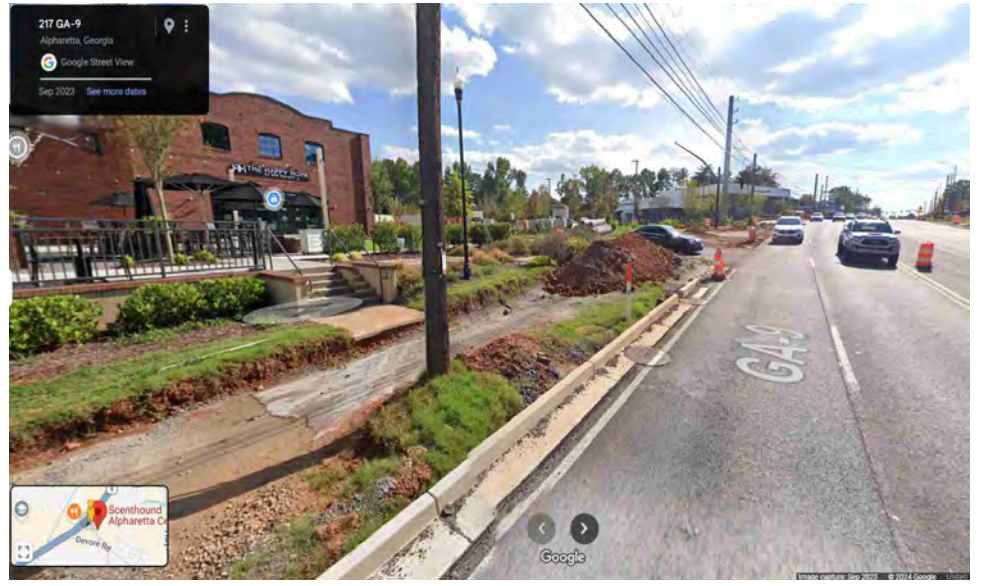
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BY OTHERS, A1 SIGNS, INC.
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DESIGNS AND ARTWORK.

INITIALS

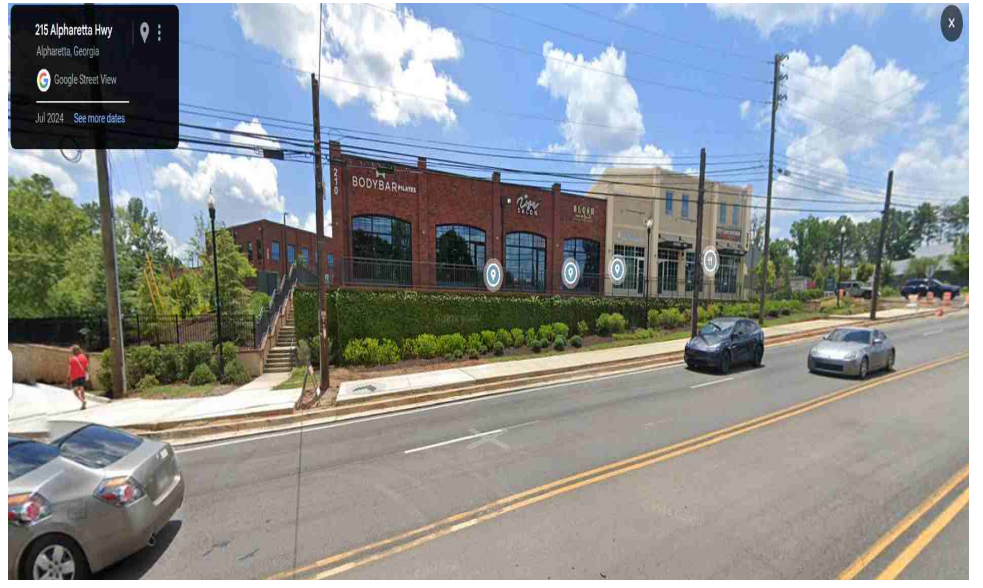
DATE

PRIMARY WIRING
OF ADEQUATE VOLTAGE
AND CIRCUITS TO SIGN
FURNISHED & CONNECTED
BY CUSTOMER

September 2023 Google Map Images



July 2024 Google Map images



THE MAXWELL
210 SOUTH MAIN ST, ALPHARETTA



FOR REFERENCE

THE PROPOSED SIGN WOULD BE:

- 23' BEHIND THE RIGHT OF WAY
- 13' BEHIND THE PROPERTY LINE
- INSTALLED DIRECTLY TO THE BUILDING 48" IN WIDTH