

# CITY OF ALPHARETTA

MP  
FOR OFFICE USE ON

Case #: \_\_\_\_\_

PH #: \_\_\_\_\_

Property Taxes & Code Violations Verified

Fee Paid Initial: \_\_\_\_\_

## PUBLIC HEARING APPLICATION

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: \_\_\_\_\_ Telephone: \_\_\_\_\_

Address: \_\_\_\_\_ Suite: \_\_\_\_\_

City \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Fax: \_\_\_\_\_

Mobile Tel: \_\_\_\_\_ Email: \_\_\_\_\_

### Subject Property Information:

Address: \_\_\_\_\_ Current Zoning: \_\_\_\_\_

District: \_\_\_\_\_ Section: \_\_\_\_\_ Land Lot: \_\_\_\_\_ Parcel ID: \_\_\_\_\_

Proposed Zoning: \_\_\_\_\_ Current Use: \_\_\_\_\_

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

Conditional Use                       Master Plan Amendment                       Comprehensive Plan Amendment

Rezoning                                       Master Plan Review

Variance                                       Public Hearing

Exception                                       Other (Specify): \_\_\_\_\_

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# APPLICANT REQUEST AND INTENT

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

Applicant's Request (Please itemize the proposal):

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

# PROPERTY OWNER AUTHORIZATION

## Property Owner Information:

Contact Name: Bill Livingston / Mansell Crossing LLC Telephone: 478-923-4669  
 Address: 1109 Russell Parkway/P.O. Box 7078 Suite: \_\_\_\_\_  
 City: warner Robins State: GA Zip: 31088

## 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 checked="" type="checkbox"/> Conditional Use |
| <input type="checkbox"/> Variance             | <input checked="" type="checkbox"/> Master Plan     |
| <input type="checkbox"/> Land Use Application | <input type="checkbox"/> Other                      |

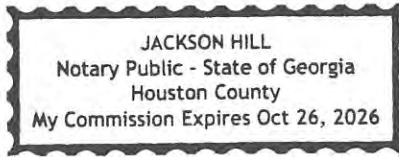
## Property Owner's Authorized Applicant (if applicable):

Name of Authorized Applicant: Same as above Telephone: \_\_\_\_\_  
 Address: \_\_\_\_\_ Suite: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

## So Sworn and Attested:

Owner Signature: [Signature] Date: 9/11/24

Notary: [Signature] Date: 9/11/24



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# DISCLOSURE FORM

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*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. 36-67 A-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: \_\_\_\_\_

Subject Public Hearing Case: \_\_\_\_\_

## **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: \_\_\_\_\_ Position: \_\_\_\_\_

Description of Contribution: \_\_\_\_\_ Value: \_\_\_\_\_

Description of Contribution: \_\_\_\_\_ Value: \_\_\_\_\_

Description of Contribution: \_\_\_\_\_ Value: \_\_\_\_\_

Description of Contribution: \_\_\_\_\_ Value: \_\_\_\_\_

Description of Contribution: \_\_\_\_\_ Value: \_\_\_\_\_

## **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. 36-67 A-1.*

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

# 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: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

*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.*

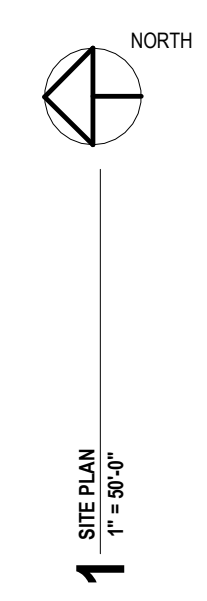
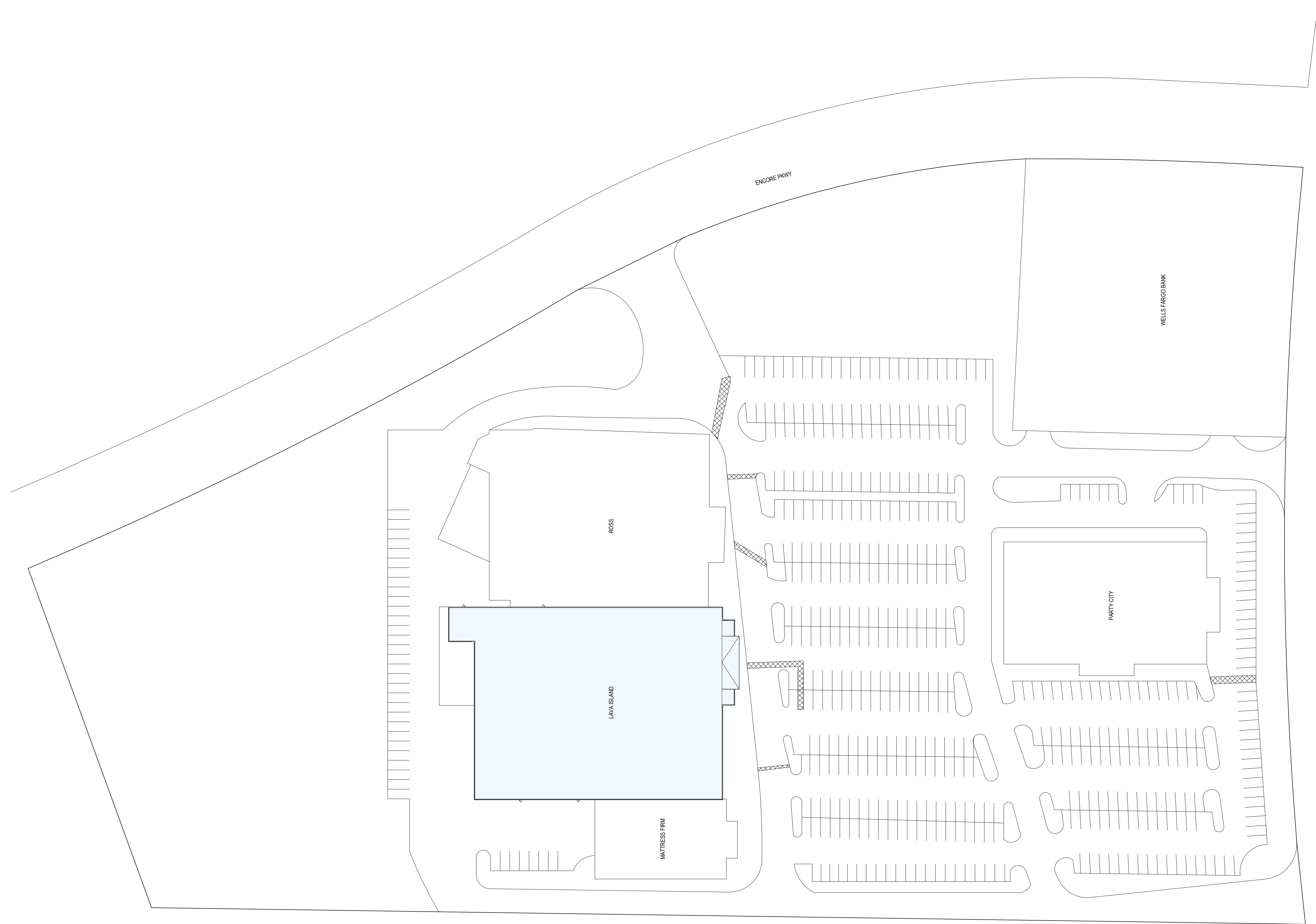
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

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> |

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.

**GENERAL NOTES**  
 1. SITE TO REMAIN AS IS NO CHANGES  
 2. PARKING TO REMAIN



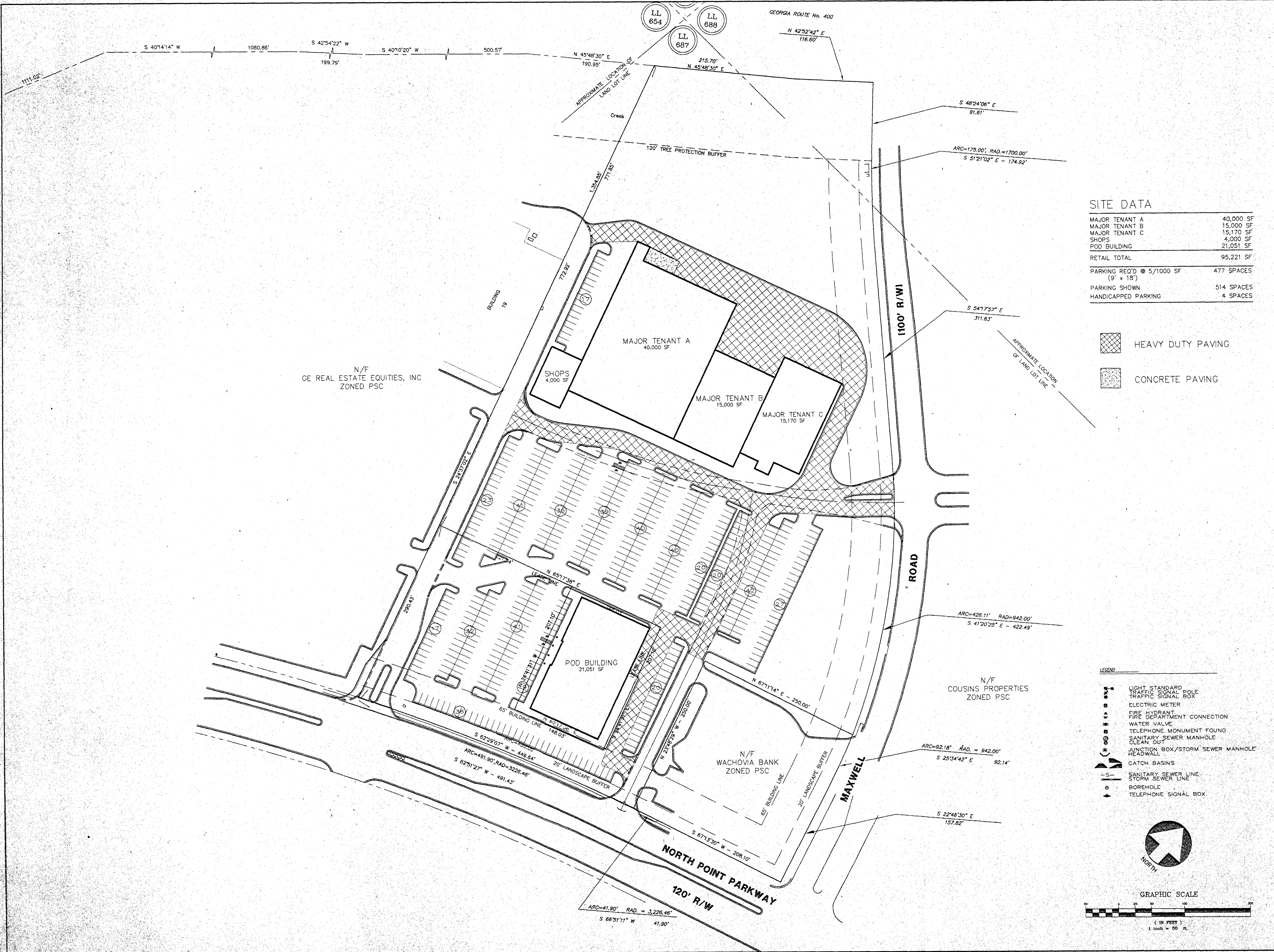
**LAVA ISLAND**  
 7121 North Point Pkwy  
 Alpharetta, GA

STAMP

REVISIONS  
 REV. DESCRIPTION DATE

PROJECT NUMBER  
**461**  
 DATE  
**SEPTEMBER 2, 2024**  
 SHEET NAME  
**SITE PLAN**

SHEET NO.  
**C101**



S 40°14'14" W 1080.86'

S 42°54'22" W 199.75'

S 40°10'20" W 500.57'

N 45°48'30" E 190.95'

N 45°48'30" E 215.70'

N 45°48'30" E 116.60'

LL 654

LL 688

LL 687

GEORGIA ROUTE No. 400

N 42°52'42" E 116.60'

S 48°24'06" E 91.61'

ARC=175.00', RAD.=1700.00'

S 51°21'02" E - 174.92'

120' TREE PROTECTION BUFFER

1.35x.85 771.83

772.82

MAJOR TENANT A 40,000 SF

SHOPS 4,000 SF

MAJOR TENANT B 15,000 SF

MAJOR TENANT C 15,170 SF

1100' R/W

S 54°17'57" E 311.63'

APPROXIMATE LOCATION OF LAND LOT LINE

N/F GE REAL ESTATE EQUITIES, INC ZONED PSC

ARC=426.11' RAD.=942.00'

S 41°20'25" E - 422.49'

POD BUILDING 21,051 SF

65' BUILDING LINE 148.03'

N 65°17'30" E 207.00'

N 67°11'14" E - 250.00'

N/F COUSINS PROPERTIES ZONED PSC

ARC=92.18' RAD.=942.00'

S 25°34'42" E 92.14'

N/F WACHOVIA BANK ZONED PSC

ARC=41.90' RAD.=3,226.46'

S 66°51'11" W 41.90'

NORTH POINT PARKWAY 120' R/W

20' LANDSCAPE BUFFER

S 22°46'30" E 157.82'

65' BUILDING LINE

20' LANDSCAPE BUFFER

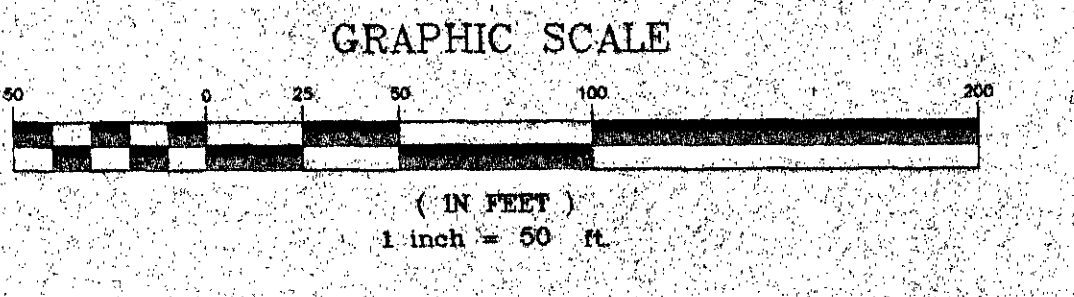
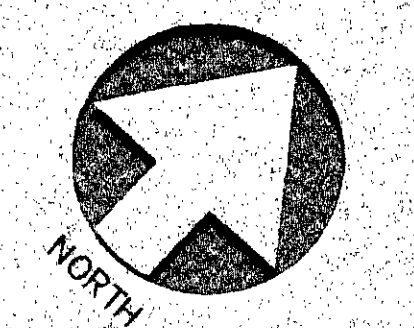
MAXWELL ROAD

**SITE DATA**

MAJOR TENANT A	40,000 SF
MAJOR TENANT B	15,000 SF
MAJOR TENANT C	15,170 SF
SHOPS	4,000 SF
POD BUILDING	21,051 SF
RETAIL TOTAL	95,221 SF
PARKING REQ'D @ 5/1000 SF (9' x 18')	477 SPACES
PARKING SHOWN	514 SPACES
HANDICAPPED PARKING	4 SPACES

- HEAVY DUTY PAVING
- CONCRETE PAVING

- LEGEND**
- LIGHT STANDARD
  - TRAFFIC SIGNAL POLE
  - TRAFFIC SIGNAL BOX
  - ELECTRIC METER
  - FIRE HYDRANT
  - FIRE DEPARTMENT CONNECTION
  - WATER VALVE
  - TELEPHONE MONUMENT FOUND
  - SANITARY SEWER MANHOLE
  - CLEAN OUT
  - JUNCTION BOX/STORM SEWER MANHOLE
  - HEADWALL
  - CATCH BASINS
  - SANITARY SEWER LINE
  - STORM SEWER LINE
  - BOREHOLE
  - TELEPHONE SIGNAL BOX



**REVISIONS**

NO.	DATE

DATE: 4/21/95

**SITE PLAN**

**LRE ENGINEERING, INC.**  
Civil Engineering Transportation Planning  
475 Peachtree St. N.E. Suite 400  
Atlanta, Georgia 30309 Tel. (404) 888-8800

**MANSELL CROSSING PHASE II**  
PREPARED FOR:  
**COUSINS / NEW MARKET DEVELOPMENT COMPANY, INC.**  
250 ATLANTA GEORGIA 30359-5283

**LRE ENGINEERING, INC.**  
475 Peachtree St. N.E. Suite 400  
Atlanta, Georgia 30309 Tel. (404) 888-8800

9428  
SHEET