

Variance Application

VAR-24-63

Submitted On: Sep 30, 2024

Applicant

 Elizabeth Cochran
 7704377822
 lizzco@bellsouth.net

Primary Location

2536 SPRING DR SE
SMYRNA, GA 30080

Applicant Information

First Name

Elizabeth

Last Name

Cochran

Street Address

2536 Spring Dr SE

City

Smyrna

State

Georgia

Zip Code

30080

Email

Lizzco@bellsouth.net

Phone Number

770-436 -7822

Are you the titleholder of the subject property?

Yes

Property Information

Property Address

2536 Spring Dr SE. Smyrna, Ga. 30080

Description of Requested Variances

Replace and widen driveway

Please check the box below if the requested variance(s) includes an increase in the maximum impervious surface area or an encroachment into a City stream buffer.

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Comprehensive Narrative

In rendering its decisions, the License and Variance Board shall consider the following factors:

1. Whether there are extraordinary and exceptional conditions applying to the property in question, or to the intended use of the property, that do not apply generally to other properties in the same district.
2. Whether any alleged hardship which is self-created by any person having an interest in the property or is not the result of mere disregard for or ignorance of the provisions from which relief is sought.
3. Whether strict application of the relevant provisions of the zoning code would deprive the applicant of reasonable use of the property for which the variance is sought.

4. Whether the variance proposed is the minimum variance which makes possible the reasonable use of the property.

A comprehensive narrative detailing the extraordinary and exceptional conditions which will necessitate a nonconforming use.
?

Acknowledgement

Applicant further affirms they are aware that any knowingly false statement made in the permit application may subject said applicant to prosecution for violation of Georgia Criminal Code, Section 16-10-20 (False Swearing) and a possible fine of not more than \$1,000.00 or imprisonment for not less than one (1) nor more than five (5) years, or both.

Applicant Signature:

true

**NOTIFICATION OF CONTIGUOUS OCCUPANTS
OR LANDOWNERS**

By signature, it is hereby acknowledged that I have been notified by Elizabeth L. Cochran
at 2536 Spring Dr SE - Smyrna, GA 30080
Intends to make an application for a variance for the purpose of replacing and widening driveway
on the premises described in the application.

NAME Chris Main ADDRESS 2544 Spring Dr

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NAME John A. Cuff ADDRESS 2537 Spring Dr

**U.S. Postal Service™
CERTIFIED MAIL® RECEIPT**
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Marquette, GA 30064

OFFICIAL USE

Certified Mail Fee \$4.85

Extra Services & Fees (check box, add fee)

Return Receipt (hardcopy) \$0.00

Return Receipt (electronic) \$0.00

Certified Mail Restricted Delivery \$0.00

Adult Signature Required \$0.00

Adult Signature Restricted Delivery \$0.00

Postage \$0.73

Total Postage and Fees \$5.58

Sent to Marla Blackstone

Street and Apt. No., or PO Box No.

City, State, ZIP+4®

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

9589 0710 5270 1213 6187 06

SEP 30 2024

SMYRNA GA 30080

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Atlanta, GA 30326

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Return Receipt (electronic) \$0.00

Certified Mail Restricted Delivery \$0.00

Adult Signature Required \$0.00

Adult Signature Restricted Delivery \$0.00

Postage \$0.73

Total Postage and Fees \$5.58

Sent to Jake Park Partners

Street and Apt. No., or PO Box No.

City, State, ZIP+4®

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

9589 0710 5270 1213 6187 13

SEP 30 2024

ATLANTA GA 30326

Real Estate (Your House or Land)

[View Bill](#) [View bill image](#)

As of 9/30/2024

Bill Year 2024
 Bill 3486

Owner COCHRAN ELIZABETH L
 Parcel ID [17077800220](#)

[View payments/adjustments](#)

Installment	Pay By	Amount	Payments/Credits	Balance	Interest	Due
1	11/15/2024	\$255.99	\$0.00	\$255.99	\$0.00	\$255.99
TOTAL		\$255.99	\$0.00	\$255.99	\$0.00	\$255.99

[Add to Cart](#)



Printed: 10/29/2024

Cobb County Online Tax Receipt

Thank you for your payment!

CARLA JACKSON TAX COMMISSIONER
HEATHER WALKER CHIEF DEPUTY
 Phone: 770-528-8600
 Fax: 770-528-8679

Payer:
 ELIZABETH COCHRAN

COCHRAN ELIZABETH L

Payment Date: 10/9/2024

Tax Year	Parcel ID	Due Date	Appeal Amount			Taxes Due
2024	17077800220	10/15/2024	Pay:	N/A	or	\$0.00
Interest	Penalty	Fees	Total Due	Amount Paid	Balance	
\$0.00	\$0.00	\$0.00	\$0.00	\$193.84	\$0.00	



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 bill!