

Variance Application

VAR-23-44

Applicant

 Kirsten Darby
 7702983271
@ kirsten@sidingatlanta.com

Primary Location

2294 GOODWOOD BLVD SE
SMYRNA, GA 30080

Applicant Information

First Name

Fernando

Last Name

Melo

Street Address

1769 Austell RD

City

Marietta

State

GA

Zip Code

30008

Email

kirsten@sidingatlanta.com

Phone Number

404-788-7648

Are you the titleholder of the subject property?

No

Titleholder Information

Full Name (i.e., First and Last Name, or Name of Entity)

Larry Lipman

Street Address

2294 Goodwood Blvd

City

Smyrna

State

GA

Zip Code

30080

Email Address

kidcoach@mindspring.com

Phone Number

404-234-3512

Property Information

Property Address

2294Goodwood Blvd

Description of Requested Variances

Additionally, the allowable maximum impervious surface area for RTD is 30%. Since this property is at 56%, a variance will be required to alter the deck in any way. In speaking with @Mark Wolff (<https://mandrillapp.com/track/click/30528190/smyrnaga.viewpointcloud.io?p=eyJzljoiZ1dlUWR3WnVpYlItTU9Mcnk3SIBlaS1XQ3prliwidil6MSwicCI6IntclnVcljozMdUyODE5MCxcInZcljoxLFwidXJsXCI6XCJodHRwczpcXFwvXFxcL3NteXJuYWdhLnZpZXdwY2ludGNsb3VkLmlvXFxcLyNcXFwvZXhwbG9yZVxcXC91c2Vyc1xcXC9hdXRoMHw2M2JjNTFmYTA3NzQxOTdIZDVMZE4YmNclixclmlkXCI6XCIZNTliNzg1YWQyMTQ0NjU0YTczMmE0ZWVkyJA2ZGFkYlwiLFwidXJsX2lkci1wiOltcljFIZDU5MmQzZGZjZGFmNmI1NzU4ZjI0OGMx>

Yzg1ZTA3OWE4OTU3ZDNcII19In0), if the deck square footage remains roughly the same or smaller, no mitigation will be required as part of the variance application since it has existed on the property at least since 2013

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.

Additionally, the allowable maximum impervious surface area for RTD is 30%. Since this property is at 56%, **a variance will be required to alter the deck in any way.** In speaking with @Mark Wolff

([will be required as part of the variance application since it has existed on the property at least since 2013](https://mandrillapp.com/track/click/30528190/smyrnaga.viewpointcloud.io?p=eyJzljoiZ1dlUWR3WnVpYlItTU9Mcnk3SIBlaS1XQ3prliwidil6MSwicCI6IntcInVcljozMduYODE5MCxcInZcljoxLFwidXJsXCI6XCJodHRwczpcXFwvXFxcL3NteXJuYWdhLnZpZXdwZ2ludGNsb3VklmVXFxcLyNcXFwvZXhwbG9yZVxcXC91c2Vyc1xcXC9hdXRoMHw2M2JjNTFmYTA3NzQxOTdlZDVIMzE4YmNclixclmlkXCI6XCIZNTliNzg1YWQyMTQ0NjU0YTczMmE0ZWVkyJA2ZGFkYlwiLFwidXJsX2lkci1wiOltcljFIZDU5MmQzZGZjZGFmNmI1NzU4ZjI0OGMxYzg1ZTA3OWE4OTU3ZDNcII19In0), if the deck square footage remains roughly the same or smaller, no mitigation</p>
</div>
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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

**STATE LICENSING BOARD FOR RESIDENTIAL AND GENERAL CONTRACTORS**

237 Coliseum Drive, Macon, GA 31217

404-424-9966

www.sos.ga.gov/plb**Authorized Permit Agent Form (ONE FORM PER PERMIT)**

This form may be used by a qualifying agent to designate an individual to obtain a permit on his/her behalf for a project for the qualifying company. The contractor should submit an original Authorized Permit Agent Form for each project for which he/she has designated an individual to pull permits. This designated individual shall further be identified as the authorized permit agent. This notarized form with an **ORIGINAL SIGNATURE** (no copies or faxes accepted), a copy of the contractor's license, a copy of the contractor's company license, and a copy of the driver's license of the authorized permit agent is to be given to the permit office in the city or county in which the project is located. **DO NOT SEND A COPY OF THIS FORM TO THE BOARD OFFICE UNLESS REQUESTED.**

License verification by permitting office should be completed by visiting <http://verify.sos.ga.gov/verification>

Name of Qualifying Agent:	Marc W Tompkins
Contractor License # (Attach a copy of license.)	RBI 002316
Name of Licensed Company:	
Company License # (Attach a copy of license.)	
Name of Authorized Permit Agent: (Attach a copy of driver's license.)	Fernando Melo

PROJECT (an original form is required for each project):

Company listed on contract:	MEM Home Exteriors
Property Owner's Name:	Larry Lipman
Street Address:	2294 Goodwood Blvd SE
Apartment or Suite #	
City, State, Zip:	Smyrna Ga- 30008

I hereby designate the above listed Authorized Permit Agent to apply for and obtain the permit(s) for the project listed above. The undersigned, being licensed as a qualifying agent, do hereby affirm and swear, under oath, that all information on this form and on accompanying documents are true and correct.

Marc Tompkins

Original Signature of Qualifying Agent (no copies or faxes accepted)

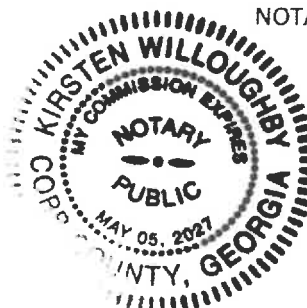
State of Georgia County of Cobb

SUBSCRIBED AND SWORN BEFORE ME ON THIS THE

19 DAY OF September 20 23Kirsten Willoughby 5-5-2027

NOTARY PUBLIC My Commission Expires:

NOTARY SEAL



U.S. Postal Service[™]
CERTIFIED MAIL[®] RECEIPT
 Domestic Mail Only

For delivery information, visit our website at www.usps.com

Stamp No. **GA 30080**

Certified Mail Fee **\$4.35**

Extra Services & Fees (check box, and fee if applicable)

<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00
<input type="checkbox"/> Return Receipt (electronic)	\$0.00
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00
<input type="checkbox"/> Adult Signature Required	\$0.00
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00

Postage **\$0.90**

Total Postage and Fees **\$5.25**

Sent To **Deborah L. Page**

Street, Apt. No. or P.O. Box No. **2305 Coastal Blvd**

City, State, ZIP+4[®] **San Jose, CA 95128-3080**

PS Form 3800, January 2023 (rev. 7-2019) See Reverse for Instructions

SMITHSONIAN POST OFFICE
 0675
 03
 Postmark
 OCT 06 2023
 10/06/2023
 30080


Grand Total: \$5.25

Credit Card Remit \$5.25

Card Name: AMEX
 Account #: XXXXXXXXXXXX1037
 Approval #: 824863
 Transaction #: 010
 AID: A000000025010801 Chip
 AL: AMERICAN EXPRESS
 PIN: Not Required

Text your tracking number to 28777 (2USPS) to get the latest status. Standard Message and Data rates may apply. You may also visit www.usps.com USPS Tracking or call 1-800-222-1811.

In a hurry? Self-service kiosks offer quick and easy check-out. Any Retail Associate can show you how.

Preview your Mail
 Track your Packages
 Sign up for FREE 
<https://informedelivery.usps.com>

All sales final on stamps and postage.
 Refunds for guaranteed services only.
 Thank you for your business.

Tell us about your experience.
 Go to: <https://postalexperience.com/Pos>
 or scan this code with your mobile device.



or call 1-800-410-7420.

UFN: 128019-0675
 Receipt #: 840-53000027-2-6718504-1
 Clerk: 03

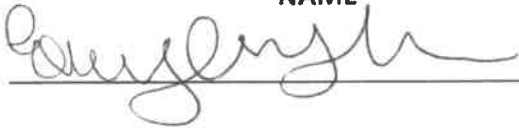
**NOTIFICATION OF CONTIGUOUS OCCUPANTS
OR LANDOWNERS**

By signature, it is hereby acknowledged that I have been notified by Larry Lipman

Intends to make an application for a variance for the purpose of _____
Rebuilding his deck with privacy walls.

_____ on the premises described in the application.

NAME



ADDRESS

2296 Goodwood Blvd Smyrna, GA 300

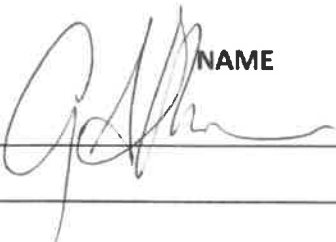
Please have adjacent property owners sign this form to acknowledge they are aware of your variance request. You may also provide certified mail receipts of notification letters sent to adjacent properties. Notification letters shall include a description of the requested variance, the License and Variance Board Meeting date and time, and a copy of the completed variance application. Adjacent and adjoining properties include any property abutting the subject property as well as any properties directly across a street.

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OR LANDOWNERS**

By signature, it is hereby acknowledged that I have been notified by Larry Lipman

Intends to make an application for a variance for the purpose of _____
Rebuilding his deck with privacy walls.

_____ on the premises described in the application.

 _____

NAME

2292 Crookwood Blvd SE Smyrna GA _____

ADDRESS

Please have adjacent property owners sign this form to acknowledge they are aware of your variance request. You may also provide certified mail receipts of notification letters sent to adjacent properties. Notification letters shall include a description of the requested variance, the License and Variance Board Meeting date and time, and a copy of the completed variance application. Adjacent and adjoining properties include any property abutting the subject property as well as any properties directly across a street.

CITY OF SMYRNA
Tax Department
PO Box 1226
Smyrna, GA 30081-1226
770-434-6600

2022 Property Tax Notice

LIPMAN LAWRENCE A
2294 GOODWOOD BLVD SE
SMYRNA, GA 30080

Please Make Check or Money Order Payable to:
City of Smyrna Tax Department

HOMESTEAD EXEMPTIONS AVAILABLE:

- 1) \$10,000 Age sixty-two (62) or older by January 1.
- 2) \$22,000 Disabled with limited income.
- 3) As a result of the City of Smyrna Taxpayer Reassessment Relief Act, after proper application has been made, when your homestead property is reassessed your homestead exemption will automatically increase by the same amount.

If you are eligible for one of these exemptions you must apply for the exemption by April 1st in order to receive the exemption in future years.

If you are a new property owner as of January 1, you need to file a change of ownership with the Cobb County Tax Office by April 1st.

2022 City of Smyrna Property Tax Notice

Bill No.	Property Description	Map Number	Fair Mkt Value	Assessed Value	Exempt Value	Taxable Value	Millage Rate	Tax Amount
10119	2294 GOODWOOD BLVD STREET LIGHT RESIDENTIAL EXEMPTIONS: H1 RESIDENTS 62 YEARS AND OLDER FLOATING HOMESTEAD	17-0702-0-0630	327,660.00	131,064.00	67,624.00	63,440.00	8.99	570.33 42.00

Pay online at <http://portal.smyrnaga.gov/MSS/citizens/default.aspx>

Important Messages - Please Read

Total of Bills by Tax Type

Taxes not paid by the due date are subject to a 5% penalty after 120 days with an additional 5% assessed after each successive 120 days up to a maximum of 20% of the principal due. In addition, interest will be assessed based on an annual calculation of the Federal Prime Rate plus 3%. This interest rate is charged per month based on the principal due. FIFA charges are a one-time charge of \$25.00	Any questions concerning payment instructions, ownership, or mailing address changes should be directed to The City of Smyrna Tax Department at 770-434-6600 If there is a question concerning the assessment of your property, please contact the Cobb County Tax Assessor's Office at 770-528-3100	Pen	0.00
		Int	0.00
		Fees	0.00
		Adjustments	0.00
		Payments	0.00
		Back Taxes	0.00
		TOTAL DUE	612.33
		DATE DUE	11/15/2022

LIPMAN LAWRENCE A
2294 GOODWOOD BLVD SE
SMYRNA, GA 30080



If this address is incorrect,
please write the correct
address on this portion.

PAYMENT INSTRUCTIONS

- Please write the bill number(s) on your check
- For a receipt, please include a stamped, self-addressed envelope.
- We send a bill to both you and your mortgage company. If you have changed your mortgage company, forward a copy of your tax bill to them
- If ownership has changed, please forward to new owner.

Bill No.	Map Number	Tax Amount
10119	17-0702-0-0630 STREET LIG	570.33 42.00
DATE DUE		TOTAL DUE
11/15/2022		612.33

CITY OF SMYRNA
Tax Department
PO Box 1226
Smyrna, GA 30081-1226

PLEASE DETACH AND RETURN THIS PORTION WITH YOUR CHECK



Printed: 10/2/2023

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:
LAWRENCE A LIPMAN

LIPMAN LAWRENCE A

Payment Date: 10/13/2022

Tax Year	Parcel ID	Due Date	Appeal Amount	Taxes Due
2022	17070200630	10/15/2022	Pay: N/A or	\$0.00

Interest	Penalty	Fees	Total Due	Amount Paid	Balance
\$0.00	\$0.00	\$0.00	\$0.00	\$711.38	\$0.00



Scan this code with your
mobile phone to view
this bill!

