

Variance Application**VAR-23-34****Applicant**

 Chris Broughton
 4049092956
 @broughtoninc1@gmail.com

Primary Location

3419 KING SPRINGS RD SE
SMYRNA, GA 30080

Applicant Information**First Name**

Chris

Last Name

Broughton

Street Address

1170 Pinehurst Dr

City

Smyrna

State

GA

Zip Code

30080

Email

Broughtoninc1@gmail.com

Phone Number

4049092956

Are you the titleholder of the subject property?

Yes

Property Information**Property Address**

3419 KINGSPRINGS RD

Description of Requested Variances

The house is currently approx. 19 inches over the set back on the right or south side of the property standing on Kingsprings looking at the house.

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.

We are currently planning to do a renovation with a courtyard side entry garage we are using our existing driveway. We are seeking to do the addition in line with the existing structure, which is currently over the set back by approximately 19 inches.

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

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View Bill [View bill image](#)

of	7/20/2023
Year	2022
	2129
Member	BROUGHTON CHRISTOPHER L & TARA K
Account ID	17052500400

[View payments/adjustments](#)

Payment	Pay By	Amount	Payments/Credits	Balance	Interest	Due
	11/15/2022	\$1,256.15	\$1,256.15	\$0.00	\$0.00	\$0.00
TOTAL		\$1,256.15	\$1,256.15	\$0.00	\$0.00	\$0.00



Printed: 8/11/2023

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:
CHASE

BROUGHTON CHRISTOPHER L & TARA K

Payment Date: 10/10/2022

Tax Year	Parcel ID	Due Date	Appeal Amount			Taxes Due
2022	17052500400	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	\$3,695.13	\$0.00



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