



OFFICE OF ZONING AND DEVELOPMENT

55 Trinity Avenue S.W., Suite 3350

Atlanta, Georgia 30303

(404) 330-6145

APPLICATION #: **V-20-174**

DATE ACCEPTED: **12/10/2020**

NOTICE TO APPLICANT

Address of Property:

663 Cumberland RD NE

City Council District: **F** Neighborhood Planning Unit (NPU): **6**

Board of Zoning Adjustment (BZA) Hearing Date:

Thursday, February 4, 2021 at 12:00 p.m.

Council Chambers, 2nd Floor, City Hall
55 Trinity Avenue, S.W.

The contact person for NPU **F** is:

Debbie Skopczynski

(404) 874-7483

chair@npufatlanta.org

Additional Contacts:

Please contact the person(s) listed above within five days to find out which meetings you will be required to attend before the next NPU meeting. If you are unable to reach the contact person, please call the city's NPU Coordinator at 404-330-6145.

Digitally signed by Racquel Jackson
DN: cn=Racquel Jackson,
o=Office of Zoning &
Development, ou=DCP,
email=rtjackson@atlantaga.gov,
c=US
Date: 2020.12.14 09:13:23 -05'00'

Gail Mooney

R.J. for Director, Office of Zoning and
Development



City of Atlanta
 Office of Zoning and Development
 55 Trinity Avenue, Suite 3350
 Atlanta, Georgia 30303
 Phone: 404-330-6145

REFERRAL CERTIFICATE

COUNCIL DISTRICT 6 APPLICATION NUMBER V-20-174

NPU F DATE FILED _____

Gail Mooney
 Name of Applicant

BUILDING PERMIT AUTHORIZING
New Garage

at 663 Cumberland Road NE 17/152
 Street Address Quadrant Land Lot & District

to be used for Residential purposes

The property is zoned R-4 (Single-Family Residential) / Beltline District

2. The Building Permit Was Denied For The Following Reasons:

Applicant seeks a variance from the zoning regulation to 1). reduce the required west side yard setback from 7 feet to 3 feet and 2). to reduce the required rear yard setback from 15 feet to 3 feet and to 3). exceed the maximum height of an accessory structure from 20 feet to 22 feet in order to construct an accessory structure (garage).

Applicant seeks no other variances at this time.

Complete review not conducted.

1982 ZONING ORDINANCE, AS AMENDED

Chapter 06 Section 16-06.008 Paragraph (2)(3)

Chapter 28 Section 16-28.004 Paragraph (3)

Tamaria Letang 12/01/2020
 Plan Reviewer Date

Gail Mooney 12-9-2020
 Applicant Date



APPLICATION FOR BOARD OF ZONING ADJUSTMENT

RECEIVED
DATE: 11/10/2020

Please mark "X" next to the type of application(s) you are submitting:

Variance	XX
Special Exception	
Variance & Special Exception	

Date Filed _____ Application Number V-20-174

Name of Applicant GAIL MOONEY Daytime Phone 770-558-7895

Company Name (if applicable) SURVEY SYSTEMS ATLANTA email GAIL@SURVEYSATLANTA.COM

Address 657 LAKE DR, SNELLVILLE, GA 30039
street city state zip code

Name of Property Owner DAN LOWERY Phone 770.557.8338

Address 663 CUMBERLAND RD, NE, ATLANTA, GA 30306
street city state zip code

Description of Property

Address of Property 663 CUMBERLAND RD, NE, ATLANTA, GA 30306
street city state zip code

Area: 9000 Land Lot: 52 District: 17, FULTON County, GA.

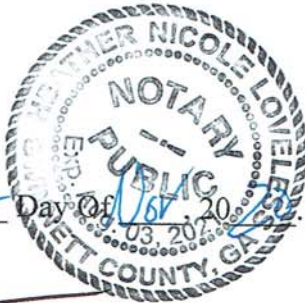
Property is zoned: R-4, Council District: 6, Neighborhood Planning Unit (NPU): F

TO THE BOARD OF ZONING ADJUSTMENT: Applicant, having received a preliminary plan review from the Office of Zoning and Development prior to seeking a building permit or certificate of occupancy, hereby requests that the Board of Zoning Adjustment grant a Variance or Special Exception.

I hereby authorize the staff of the Office of Zoning and Development to inspect the premises of the above-described property. I understand that it is my responsibility to post a public notice sign on the property according to the instructions given to me by the Office of Zoning and Development upon filing this application. I swear that all statements herein and attached hereto are true and correct to the best of my knowledge and belief.

Gail Mooney
Owner or Agent for Owner (Applicant)

Gail Mooney
Print Name of Owner



Sworn To And Subscribed Before Me This 2 Day Of Nov, 2020

Heather Nicole Soble
NOTARY PUBLIC

RECEIVED

DATE: 12/7/2020



SURVEY SYSTEMS ATLANTA
657 LAKE DR, SW
ATLANTA, GA 30039
770-558-7895

December 2, 2020

Letter of Justification
663 Cumberland Rd, NE

Variance request to reduce the south setback line from 15 feet to 3 feet, the west property line from 7.5 feet to 3 feet and maximum height from 20 feet to 22 feet to allow for the construction of a 2 story garage/carport with attic space for storage.

This house was built in 1929, when there were no limitations to construction. The existing driveway runs the entire length of the west property line to a parking pad that was within inches of both the west and south property line. Neither adjoining properties have any improvements in any proximity to the proposed garage/carport addition.

The granting of this variance request would allow the property owners to enjoy the comfort of a garage/carport with additional storage and also continue to enjoy a portion of their back yard from their deck and screened porch which face the back yard. Adhering to the setbacks would render 15 feet to the rear of the garage unusable.

The house occupies a large portion of the lot, which is peculiar to this property. Due to this location, the client has a small back yard which is particular to this lot.

If relief is granted, there would not be no detriment to the public good. The attached GIS map shows no improvements or structure near the proposed garage/carport location.

Thank you for your consideration and please let me know if you have any questions!

Gail Mooney

Applicant

AUTHORIZATION BY PROPERTY OWNER

(Required only if the person filing the application is not the owner of the property subject to the proposed application.)

(Please print clearly. Must be the original document. A copy will not be accepted.)

I, DANIEL M. LOWERY (OWNER'S NAME) SWEAR AND AFFIRM THAT I AM THE OWNER OF THE PROPERTY AT 663 CUMBERLAND ROAD NE (PROPERTY ADDRESS), AS SHOWN IN THE RECORDS OF FULTON COUNTY, GEORGIA, WHICH IS THE SUBJECT MATTER OF THE ATTACHED APPLICATION. I AUTHORIZE THE PERSON NAMED BELOW TO FILE THIS APPLICATION AS MY AGENT.

OWNER'S TELEPHONE NUMBER: 770 557 8338

Daniel M. Lowery
SIGNATURE OF OWNER

DANIEL M. LOWERY
PRINT NAME OF OWNER



V-20-174

NAME OF APPLICANT:

LAST NAME MOONEY FIRST NAME GAEL

ADDRESS 657 LAKE DR. SW SUITE _____

CITY SHELLOVILLE STATE GA ZIP CODE 30039

APPLICANT'S TELEPHONE NUMBER: 770. 558. 7895

APPLICANT'S EMAIL ADDRESS: gael@surreysystemsatlanta.com

PERSONALLY APPEARED BEFORE ME THE ABOVE NAMES, WHO SWEARS THAT THE INFORMATION CONTAINED IN THIS AUTHORIZATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.

Heather Nicole Lovelless
NOTARY PUBLIC

11-2-2020

DATE



