



APPLICATION FOR VARIANCE TO THE CITY OF SMYRNA

Type or Print Clearly

(To be completed by City)

Ward: 4

Application Number: V21-055

Mayor and Council Date: 6/21/21

APPLICANT: Stephen Wood

Representative's Name (print):

Address: 3581 S Sherwood Rd SE Smyrna GA 30082

Business Phone: Cell Phone: 770 402 6629 Home Phone:

E-Mail Address: chase.wood.005@gmail.com

Signature of Representative: [Handwritten Signature]

TITLEHOLDER: Stephen Wood

Address: 3581 S Sherwood Rd SE 30082

Business Phone: Cell Phone: 770 402 6629 Home Phone:

Signature: [Handwritten Signature]

VARIANCE: Present Zoning: R-15 Type of Variance:

Explain Intended Use: Privacy Fence for noise / traffic, safety, and aesthetics

Location: 3581 S Sherwood Rd SE 30082

Land Lot(s): District: Size of Tract: Acres

(To be completed by City)

Received: 5/28/21

Legal Ad Posted:

Signs Posted:

Approved/Denied:

CONTIGUOUS ZONING

North: LC

East: R-15

South: R-15

West: RTD

**NOTIFICATION OF CONTIGUOUS OCCUPANTS
OR LANDOWNERS**

By signature, it is hereby acknowledged that I have been notified that _____

Intends to make an application for a variance for the purpose of _____

_____ on the premises described in the application.

NAME

ADDRESS

ROBERT MASSARO
RMT E Man

3579 S. Sherwood Rd SE, Smyrna
404 422 5765

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 Mayor and Council 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.

7020 2450 0002 2172 1577

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

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

OFFICIAL USE

Certified Mail Fee	\$
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input checked="" type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$
Postage	\$
Total Postage and Fees	\$

Postmark
Here

Sent To

Street and Apt. No., or PO Box No. 3605 N Cooper Lake Dr

City, State, ZIP+4® SMITH GA 30082

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

7020 2450 0002 2172 1584

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OFFICIAL USE

Certified Mail Fee	\$
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$
Postage	\$
Total Postage and Fees	\$

Postmark
Here

Sent To

Street and Apt. No., or PO Box No. 6205 River Chase Circle NW

City, State, ZIP+4® Atlanta GA 30328

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

7020 2450 0002 2172 1591

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Certified Mail Fee	\$
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$
Postage	\$
Total Postage and Fees	\$

Postmark
Here

Sent To

Street and Apt. No., or PO Box No. 2120 Hwy 81

City, State, ZIP+4® loganville GA 30052

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

**ZONING ORDINANCE
SECTION 1403 VARIANCE REVIEW STANDARDS**

In rendering its decisions, the Mayor and City Council 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.

Please include your narrative here, or you may submit a typed narrative as a supplement to this application.

COMPREHENSIVE NARRATIVE

The fence was put up for the following reasons:

- privacy
- noise / traffic that is daily and ongoing from north copper lake rd
- safety for our 2 dogs
- visually appealing
- improvement to property



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

Printed: 6/2/2021

Cobb County Online Tax Receipt

Thank you for your payment!

Payer:
SUNTRUST MORTGAGE INC

FOURTH SPIRUS REIM ATLANTA LLC

Payment Date: 10/8/2020

Tax Year	Parcel ID	Due Date	Appeal Amount		Taxes Due
2020	17033900440	10/15/2020	Pay:	N/A or	\$0.00
Interest	Penalty	Fees	Total Due	Amount Paid	Balance
\$0.00	\$0.00	\$0.00	\$0.00	\$2,727.45	\$0.00



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