

ATTACHMENT A – REZONING AMENDMENT APPLICATION

Application Date: 2.4.2022

Applicant/Agent: LaVon Morell

Applicant Email Address: lxm83@aol.com

Phone # 912-656-6084

Applicant Mailing Address: 519 Savannah Town Road

City: Springfield State: GA Zip Code: 31329

Property Owner, if different from above: LaVon Morell
Include Signed & Notarized Authorization of Property Owner

Owner's Email Address (if known): _____

Phone # _____

Owner's Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Property Location: Savannah Town Road (519)

Proposed Road Access: Same

Present Zoning of Property: AR-1 Proposed Zoning: AR-2

Tax Map-Parcel # 264-23 Total Acres: 10.15 Acres to be Rezoned: 3.84

Lot Characteristics: _____

WATER

Private Well

Public Water System

SEWER

Private Septic System

Public Sewer System

If public, name of supplier: _____

Justification for Rezoning Amendment: To split the parcel

List the zoning of the other property in the vicinity of the property you wish to rezone:

North _____ South _____ East _____ West _____

1. Describe the current use of the property you wish to rezone.

Home

2. Does the property you wish to rezone have a reasonable economic use as it is currently zoned?

Yes

3. Describe the use that you propose to make of the land after rezoning.

Home

4. Describe the uses of the other property in the vicinity of the property you wish to rezone?

Home

5. Describe how your rezoning proposal will allow a use that is suitable in view of the uses and development of adjacent and nearby property?

Home.

6. Will the proposed zoning change result in a use of the property, which could cause an excessive or burdensome use of existing streets, transportation facilities, utilities, or schools?

No

Applicant Signature:

Aaron Morell

Date

2.4.2022

SURVEYOR'S CERTIFICATION

As required by subsection(d) of O.C.G.A. Section 15-6-67, this plat has been prepared by a land surveyor and approved by all applicable local jurisdictions for recording as evidenced by approved, certified, signatures, stamps or statements hereon. Such approvals or affirmations should be confirmed with the appropriate governmental bodies by any purchaser or user of this plat as to intended use of any parcel. Furthermore, the undersigned land surveyor certifies that this plat complies with the minimum technical standards for property surveys in Georgia as set forth in the rules and regulations of the Georgia Board of Registration for Professional Engineers and Land Surveyors and as set forth in O.C.G.A. Section 15-6-67.

Warren E. Poynthress, Registered Land Surveyor, No. 1953

Date _____

DATE: OCTOBER 21, 2021
 BY: WARREN E. POYNTHRESS
 Reg. Land Surveyor # 1953
 991 Hunters Road
 Savannah, Ga.
 30467
 Tele. - (912) 857-3288
 EQUIP: TOPCON 303 TOTAL STATION
 Closure #7350

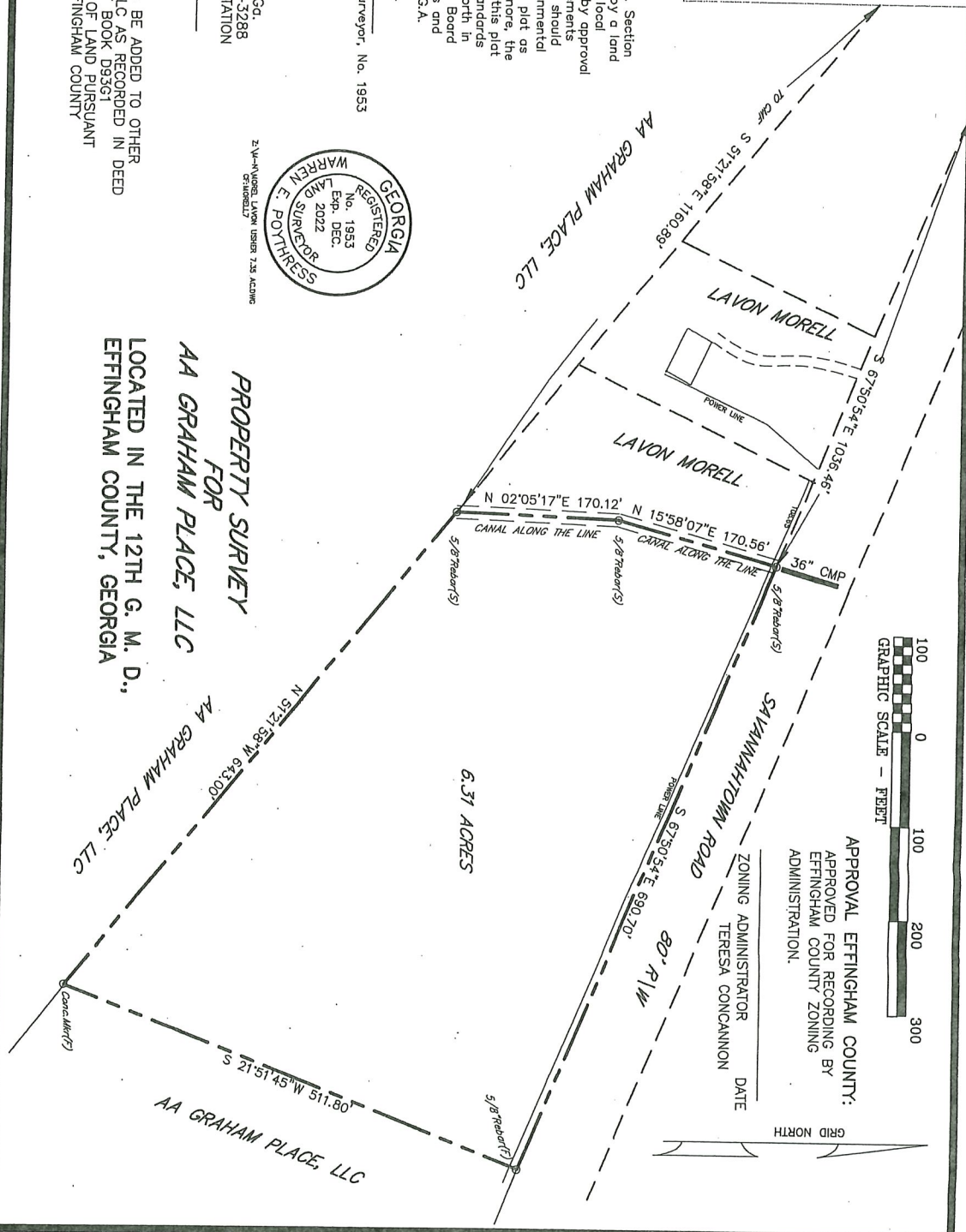


Z:\A-1\AUGUST LAYON USER\735 ACRES
 #7350

THIS 6.31 ACRES PARCEL IS TO BE ADDED TO OTHER LANDS OF AA GRAHAM PLACE, LLC AS RECORDED IN DEED BOOK 2058 PAGE 27 AND PLAT BOOK D9361 AND BECOMES A SINGLE TRACT OF LAND PURSUANT TO THE PROVISIONS OF THE EFFINGHAM COUNTY ZONING ORDINANCE.

**PROPERTY SURVEY
 FOR
 AA GRAHAM PLACE, LLC**

LOCATED IN THE 12TH G. M. D.,
 EFFINGHAM COUNTY, GEORGIA



APPROVAL EFFINGHAM COUNTY:
 APPROVED FOR RECORDING BY
 EFFINGHAM COUNTY ZONING
 ADMINISTRATION.

ZONING ADMINISTRATOR
 TERESA CONNANON
 DATE _____

ATTACHMENT B - OWNERSHIP CERTIFICATION

I, (we) the undersigned, do hereby certify that I (we) own the property affected by the proposed Amendment to the Effingham County Zoning Ordinance by virtue of a deed date

May 7, 2009, on file in the office of the Clerk of the Superior Court of Effingham County, in Deed Book 1850 page 16.

I hereby certify that I am the owner of the property being proposed for Rezoning Amendment Approval, and I have answered all of the questions contained herein and know the same to be true and correct. I hereby acknowledge that I have reviewed the application checklist, and further acknowledge that any omission of the items above will cause a delay in the review of my request.

Owner's signature Laron Morell

Print Name Laron Morell

Owner's signature _____

Print Name _____

Owner's signature _____

Print Name _____

Sworn and subscribed before me this 4th day of February, 2022.

Kathleen Erin Dunnigan
Notary Public, State of Georgia



BOOK 01850-0016
MAY 10 2009

2009 MAY -7 PM 3:34

ELIZABETH Z. HURSEY
CLERK E.C.C.S.C.

RETURN TO:
REDDICK & EXLEY
ATTORNEYS AT LAW
P. O. BOX 385
SPRINGFIELD, GA 31329

STATE OF GEORGIA

COUNTY OF EFFINGHAM

THIS INDENTURE, Made the 7th day of May, 2009, between EDDIE MORELL, JR. of the FIRST PART, and LAVON MORELL of the SECOND PART,

WITNESSETH, That the said party of the FIRST PART, for and in consideration of the natural love and affection he has for son, the said SECOND PARTY herein, has granted, given, conveyed and confirmed and by these presents does grant, give, convey and confirm unto the said party of the SECOND PART, his heirs and assigns, all of the following described property, to-wit:

ALL that certain tract or parcel of land situate, lying and being in the 12th G.M. District of Effingham County, Georgia, containing a total of Ten and Fifteen Hundred (10.15) acres, more or less. Said Parcel of land being triangular in shape and being bounded on the northeast by Savannah Town Road; on the southeast by lands of Eddie Morell, Jr.; and on the southwest by lands of J.D. Usher.

Express reference hereby made to the plat of said lands made by Warren E. Poythress, R.L.S. #1953, dated December 17, 2008, recorded in the office of the Clerk of the Superior Court of Effingham County, Georgia, in Plat Cabinet "D", slide 26 A-1, for better determining the metes and bounds of said lands herein conveyed.

SUBJECT to restrictive covenants and easements of record.

TO HAVE AND TO HOLD the said above granted and described property, with all and singular the rights, members and appurtenances thereunto appertaining to the only proper use, benefit and behoof of the said party of the SECOND PART, his heirs, executors, administrators and assigns, in FEE-SIMPLE.

IN WITNESS WHEREOF, the said party of the FIRST PART has hereunto set his hand, affixed his seal, and delivered these presents, the day and year first above written.

Signed, sealed and delivered in the presence of:

Eddie Morell Jr (SEAL)
EDDIE MORELL, JR.

Ramon M Jackson
Unofficial Witness

R Edward Reddick Jr
Official Witness - Notary Public
pmj

R. EDWARD REDDICK, JR.
Notary Public, Effingham County, Georgia
My Commission Expires August 23, 2010



Coastal Health District

Lawton C. Davis, M.D., District Health Director

802 Highway 119 South, Post Office Box 350

Springfield, Georgia 31329

Phone: 912-754-6850 | Fax: 912-754-0078

February 22, 2022

Effingham County Zoning Board
Springfield, GA 31329

Re: Rezoning Amendment
Lavon Morell
519 Savannah Town Road, Springfield GA 31329
Pin: 264-23
Total Acres: 10.15 Acres to be rezoned: 3.84

To Whom It May Concern:

The Effingham County Health Department, Division of Environmental Health, has reviewed the request to rezone the above referenced tract of land from AR-1 to AR-2. The proposed rezoning request is preliminarily approved based on the following supporting documents and does not meet the requirements for a proposed subdivision as defined by Rules of the Department of Public Health, Chapter 511-3-1.

- Completed Effingham County Rezoning Request Packet.

The following items must be submitted.

1. Completed Subdivision Application.
2. Completed Plat Review Application.
3. Level III soils overlay signed and stamped by the soil classifier on the Final Plat with Soil Suitability Description.
4. The following signature block should be used on all plats that require Health Department approval

Based upon the representations of the engineer/surveyor whose seal is affixed hereto and supplementary information provided, a review of the plat as represented by the said engineer/surveyor finds that this plat complies with the OSSMS regulations for a typical size residence of 3 or 4 bedrooms with basic appurtenances. Each lot must be reviewed and approved for On-Site Sewage Management System placement prior to the issuance of a construction permit. Modifications or changes in site designation may void this approval.



We Protect Lives.

This letter does not constitute a final approval, any matters overlooked or matters which arise after the date of this letter may result in additional conditions being applied or the proposed division of land being denied. The review is valid for one year from the date of this letter. If the survey plan has not been approved within this time, application must be made for an extension of the Preliminary Approval.

If you have any additional questions, please contact the Effingham County Health Department, Environmental Health Division, at (912) 754-6850.

Sincerely,



Darrell M. O'Neal, MPA
Environmental Health County Manager
Effingham County Health Department



- Legend
- Parcels
 - Roads

Parcel ID	02640023	Owner	MORELL LAVON	Last 2 Sales			
Class Code	Consv Use		519 SAVANNAH TOWN RD	Date	Price	Reason	Qual
Taxing District	01-County		SPRINGFIELD, GA 31329	3/21/2012	0	U	U
	County	Physical Address	519 SAVANNAH TOWN RD	5/14/2010	0	L	U
Acres	10.15	Assessed Value	Value \$230673				

(Note: Not to be used on legal documents)

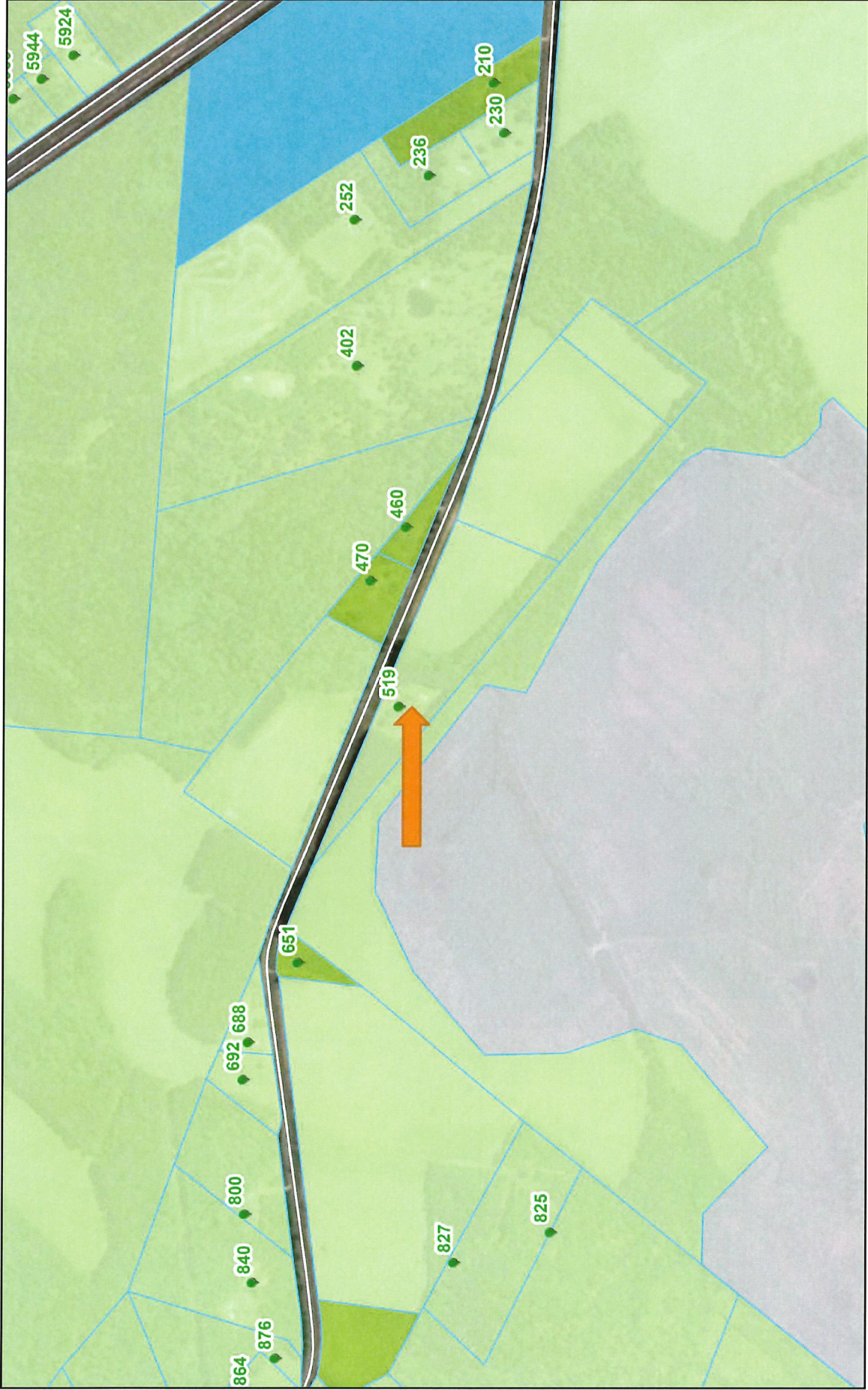
Date created: 3/11/2022
 Last Data Uploaded: 3/11/2022 8:56:29 AM

Developed by Schneider
 GEOSPATIAL

519 SAVANNAH TOWN ROAD

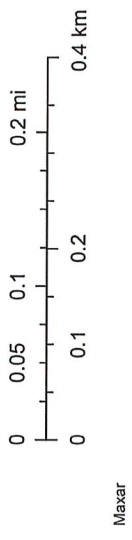


519 SAVANNAH TOWN ROAD



2/12/2022, 9:13:54 PM

1:9,028



- Address Points
- Parcels2020
- Roads
- Effingham County Zoning
 - AR-1
 - AR-2
 - B-3
 - CP

DB

9.5

EFFINGHAM COUNTY REZONING CHECKLIST

Applicants requesting a Zoning change shall supply to the Planning Board information describing the proposed change plus supporting data relating to the change to assist the Planning Board in making their determination. The supporting documentation shall include a format substantially the same as the checklist/criteria used by the Planning Board in evaluating the requested zoning change.

After receiving all information presented as to each zoning proposal at any public hearing provided for in this Article, and prior to making any recommendation thereon, the Planning Board shall consider each of the eight questions contained in the following checklist in written form and forward a copy of the same to the Board of Commissioners together with any additional material deemed appropriate:

CHECK LIST:

The Effingham County Planning Commission recommends:

APPROVAL _____

DISAPPROVAL _____

Of the rezoning request by applicant **LaVon Morell**– (Map # 264 Parcel # 23) from **AR-1** to **AR-2** zoning.

Yes No ? 1. Is this proposal inconsistent with the county’s master plan?

Yes No ? 2. Could the proposed zoning allow use that overload either existing or proposed public facilities such as street, utilities or schools?

Yes No ? 3. Could traffic created by the proposed use, or other uses permissible under the zoning sought, traverse established single-family neighborhoods on minor streets, leading to congestion, noise, and traffic hazards?

Yes No ? 4. Does the property which is proposed to be rezoned have a have a reasonable economic use under existing zoning?

Yes No ? 5. Does the proposed change constitute “spot zoning” which would permit a use which would be unsuitable, considering the existing use and development of adjacent and nearby property?

Yes No ? 6. Would the proposed change in zoning adversely affect existing use or usability of adjacent or nearby property?

Yes No ? 7. Are nearby residents opposed to the proposed zoning change?

Yes No ? 8. Do other conditions affect the property so as to support a decision against the proposal?

EFFINGHAM COUNTY REZONING CHECKLIST

RT

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AZ

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BKS 3/21/22

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