



Date Received: 3-12-24

APPLICANT INFORMATION

APPLICANT NAME: Reginald Ransome

ADDRESS: 10 Perimeter Park Dr. Apt 218 Atl, GA 30341

PHONE: [REDACTED] CELL: [REDACTED] FAX: [REDACTED]

EMAIL ADDRESS: [REDACTED]

OWNER INFORMATION (If different from Applicant)

OWNER NAME: Bhavesh Shah

ADDRESS: 249 N. Main St Jonesboro GA 30236

PHONE: [REDACTED] CELL: [REDACTED] FAX: [REDACTED]

EMAIL ADDRESS: [REDACTED]

PROPERTY INFORMATION (attach legal description)

ADDRESS: 249 N. Main St. Jonesboro GA 30236 Ste. A1

PARCEL ID#: 13240BA005 LAND LOT: [REDACTED] DISTRICT: [REDACTED]

CONDITIONAL USE PERMIT REQUEST

CURRENT ZONING: C-2 CURRENT LAND USE: COMMERCIAL SUITES

PROPOSED LAND USE: VEHICLE SALES LOT

DESCRIPTION OF USE (ex.: number of employees, details of operation, etc.):
OFFICE PLUS SALES LOT FOR 10 TO 20 VEHICLES
IN EXISTING PAVED AREA

CERTIFICATION OF OWNERSHIP

I hereby certify that I am the owner of the property shown on the attached plat, described in the attached legal description, and identified as follows: _____

Bhavesh Shah
Type or Print Owner's Name

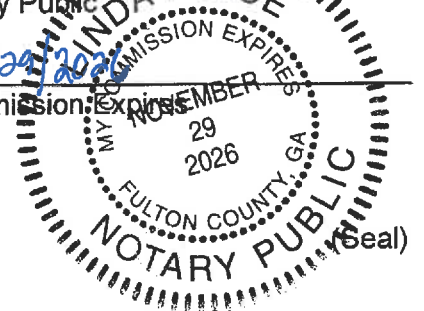
Bm
Owner's Signature

03/12/26
Date

Sworn and subscribed before me this
12th day of March, 2026

Linda Price
Notary Public

11/29/2025
Commission Expires



POWER OF ATTORNEY (if owner is not the applicant)

Applicant states under oath that: (1) he/she is the executor or Attorney-in-fact under Power-of-Attorney for the owner (attach a copy of Power-of-Attorney letter); (2) he/she has an option to purchase said property (attach a copy of the contract); or (3) he/she has an estate for years which permits the petitioner to apply (attach a copy of lease).

Type or Print Owner's Name

Owner's Signature

Date

Sworn and subscribed before me this
____ day of _____, _____

Notary Public

Commission Expires

(Seal)

Type or Print Applicant's Name

Applicant's Signature

Date

ATTORNEY / AGENT

CIRCLE ONE: Attorney Agent

Type or Print Attorney / Agent's Name

Attorney / Agent's Signature

Address

Phone Number

Email Address

AUTHORIZATION TO INSPECT PREMISES

I/we Blaveth N. Shale am/are the owner(s) of the subject property, which is the subject matter of this application. I/we authorize the City of Jonesboro to inspect the premises, which is the subject of this request for a Conditional Use Permit.

Blaveth N. Shale
Type or Print Owner's Name

Bm
Owner's Signature

03/12/26
Date



CONDITIONAL USE PERMIT APPLICATION CHECKLIST

To be completed when accepting all conditional use applications. Checklist should be attached to the application. All documents are required prior to acceptance of the application.

Required Item	Requirements	Copies	Check/Initial
Application Fee	\$600.00 per request Check/Money Order or CC		✓
Application Checklist	This application checklist must be submitted with application packet	1	✓
Application Form	Must be complete, including notarization as indicated	10	✓
Survey	Accurate, up-to-date certified survey of the property with metes and bounds shown. Existing thoroughfares; existing drainage areas; existing buildings, structures and facilities; existing utilities on or adjacent to the property; and ownership, zoning and uses of all property adjacent to or within 200 feet of the property should also be shown.	10	✓
Legal Description	Accurate written legal description of the property which matches the metes and bounds shown on the survey.	10	✓
Warranty Deed	A copy of the recorded Warranty Deed	10	✓
Lease Agreement	A copy of the lease agreement between the property owner and the applicant, if applicable. Lease must identify party responsible for reclamation of the property.	10	✓
Letter of Intent	A letter clearly stating the proposed use and development intent.	10	✓
Conceptual Site Plan	Conceptual site layout indicating the distinctions between the current and proposed site conditions. Should be drawn at a scale of at least 1:20.	10	✓
Architectural Drawings	Architectural renderings or photographs of the proposed building elevations are helpful, but not required unless the proposed zoning is being conditioned to architectural exhibits submitted.	10	N/A

(For Office Use Only)

Total Amount Paid \$ 600 Check# _____ Money Order # _____ Received by: Faith Akuta
 Application checked by: Dawn Allen Date: 6/17/26
 Pre-application meeting: _____ Date: _____