



LAWRENCEVILLE

GEORGIA

SPECIAL USE PERMIT APPLICATION

APPLICANT INFORMATION	PROPERTY OWNER INFORMATION*
NAME: <u>MUHTAR PASHA</u>	NAME: <u>GKA Properties LLC</u>
ADDRESS: <u>2756 Old Peachtree Road</u>	ADDRESS: <u>PO Box 490550</u>
CITY: <u>Dacula GA</u>	CITY: <u>Lawrenceville</u>
STATE: <u>GA</u> ZIP: <u>30019</u>	STATE: <u>GA</u> ZIP: <u>30049</u>
PHONE: <u>706-461-2946</u>	PHONE: <u>770-962-5905</u>
CONTACT PERSON: <u>MUHTAR PASHA</u> PHONE: <u>706-461-2946</u>	
CONTACT'S E-MAIL: <u>MUHTARPASHA@HOTMAIL.COM</u>	
* If multiple property owners, each owner must file an application form or attach a list, however only one fee. Multiple projects with one owner, must file separate applications, with separate fees.	
ZONING DISTRICT(S): <u>7th</u> ACREAGE: <u>0.6764</u>	
PARCEL NUMBER(S): <u>R 7010063</u>	
ADDRESS OF PROPERTY: <u>860 Gollins Hill Road, Lawrenceville, GA 30043</u>	
PROPOSED SPECIAL USE: <u>Place of worship</u>	

MUHTAR PASHA
SIGNATURE OF APPLICANT
DATE: 5/13/24
TYPED OR PRINTED NAME
DATE: 5/13/24

Kathy Bostock
SIGNATURE OF OWNER
DATE: 5/13/24
TYPED OR PRINTED NAME
DATE: 5/13/24



25 Clayton St • PO Box 2200 • Lawrenceville, Georgia 30046-2200
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SUP2024-00091
RECEIVED: MAY 3, 2024
PLANNING AND DEVELOPMENT DEPARTMENT



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DISCLOSURE OF CAMPAIGN CONTRIBUTIONS

Have you, within the two years immediately preceding the filing of this application, made campaign contributions aggregating \$250.00 or more to the Mayor of the City of Lawrenceville, a member of the City Council, or to a member of the Planning Commission of the City of Lawrenceville? N

N

If the answer is yes, please complete the following section:

NAME OF GOVERNMENT OFFICIAL	CONTRIBUTIONS (List all which aggregate to \$250 or more)	DATE CONTRIBUTION WAS MADE (Within last two years)

Have you, within the two years immediately preceding the filing of this application, made gifts having in the aggregate a value of \$250.00 or more to the Mayor of the City of Lawrenceville, a member of the City Council, or to a member of the Planning Commission of the City of Lawrenceville? N

N

If the answer is yes, please complete the following section:

NAME OF GOVERNMENT OFFICIAL	CONTRIBUTIONS (List all which aggregate to \$250 or more)	DATE CONTRIBUTION WAS MADE (Within last two years)

Attach additional sheets if necessary to disclose or describe all contributions/gifts.



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GEORGIA

VERIFICATION OF CURRENT PAID PROPERTY TAXES FOR SPECIAL USE PERMIT

THE UNDERSIGNED BELOW IS AUTHORIZED TO MAKE THIS APPLICATION. THE UNDERSIGNED CERTIFIES THAT ALL CITY OF LAWRENCEVILLE PROPERTY TAXES BILLED TO DATE FOR THE PARCEL LISTED BELOW HAVE BEEN PAID IN FULL TO THE CITY OF LAWRENCEVILLE, GEORGIA. IN NO CASE SHALL AN APPLICATION BE PROCESSED WITHOUT SUCH PROPERTY VERIFICATION.

*Note: A SEPARATE VERIFICATION FORM MUST BE COMPLETED FOR EACH TAX PARCEL INCLUDED IN THE SPECIAL USE PERMIT REQUEST.

PARCEL I.D. NUMBER:
(Map Reference Number)

7th - 10 - R 7010063
District Land Lot Parcel

Signature of Applicant

Date

Type or Print Name and Title

PLEASE TAKE THIS FORM TO THE TAX COMMISSIONER'S OFFICE AT THE GWINNETT JUSTICE AND ADMINISTRATION CENTER, 75 LANGLEY DRIVE, FOR THEIR APPROVAL BELOW.

REVENUE TECHNICIAN'S USE ONLY

(PAYMENT OF ALL PROPERTY TAXES BILLED TO DATE FOR THE ABOVE REFERENCED PARCEL HAVE BEEN VERIFIED AS PAID CURRENT AND CONFIRMED BY THE SIGNATURE BELOW)

NAME

TITLE

DATE

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