



4303 Lawrenceville Road
P.O. Box 39
Loganville, GA 30052

Application for Planning Commission Board Membership

(PLEASE PRINT)

1/24/2024
Date of Application

OLAOLUWA
Last Name

TOYIN
First Name

W.
Middle Name

[Redacted]
Address

[Redacted]
City

GA [Redacted]
State Zip Code

[Redacted]
Phone Number

[Redacted]
Cell Number

[Redacted]
E-mail Address

Have you been a member of a board or commission with the City of Loganville in the past?

Yes No FEBRUARY 2025 TO PRESENT
If Yes, give dates and name of board

How long have you lived in the City of Loganville?

10 YRS

Have you ever been convicted of a felony?

Yes No

If Yes Please explain _____

Education:

High School	<u>Multilateral Grammar School</u>	Years Completed	<u>1975</u>
Course of Study	<u>Gen. Studies</u>	Diploma/Degree	<u>Diploma</u>
Undergraduate College	<u>Columbia Southern</u>	Years Completed	<u>2001</u>
Course of Study	<u>Criminal Justice</u>	Diploma/Degree	<u>BSc</u>
Graduate/Professional School	<u>Your University</u>	Years Completed	<u>2022</u>
Course of Study	<u>Management</u>	Diploma/Degree	<u>PHD</u>

Employment:

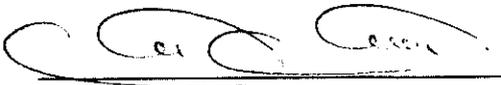
Employer Toyin Olachure Agency Job Title Owner
Work Performed Insurance Broker

In the space provided, please tell us why you are interested in becoming a member of the board you are applying for. Serve the Community.

What special skills or experience do you have that may be helpful to us in considering you application. Business & Management experience.

35 years of Law Enforcement experience.

I hereby authorize the City of Loganville to receive any criminal history record information pertaining to me, which may be in the files of any state or local criminal justice agency in Georgia.



Applicant's Signature

1/24/2026

Date



4303 Lawrenceville Road
P.O. Box 39
Loganville, GA 30052

Application for Planning Commission Board Membership

(PLEASE PRINT)

2-7-2016
Date of Application

SHANKS
Last Name

REESE
First Name

C
Middle Name

Address

City

State Zip Code

Phone Number

Cell Number

E-mail Address

Have you been a member of a board or commission with the City of Loganville in the past?
 Yes No PLANNING COMMISSION ABOUT 3 YEARS AGO
If Yes, give dates and name of board

How long have you lived in the City of Loganville? SINCE 2001
Have you ever been convicted of a felony?
 Yes No

If Yes Please explain _____

Education:

High School	<u>✓</u>	Years Completed	<u>All</u>
Course of Study	<u>general</u>	Diploma/Degree	<u>yes</u>
Undergraduate College	_____	Years Completed	_____
Course of Study	_____	Diploma/Degree	_____
Graduate/Professional School	<u>VPI</u>	Years Completed	<u>1</u>
Course of Study	<u>BUSINESS</u>	Diploma/Degree	<u>No</u>

Employment:

Employer HMS Job Title ASSOCIATION MANAGER
Work Performed HOA MANAGEMENT

In the space provided, please tell us why you are interested in becoming a member of the board you are applying for. Interested in the development of the city for the benefit of all

What special skills or experience do you have that may be helpful to us in considering your application.

HAVE SERVED BEFORE IN LOGANVILLE
ALSO SERVED IN TAPPAN HANCOCK VA
GRADUATE OF FROM ARE COMMUNITY PLANNING

I hereby authorize the City of Loganville to receive any criminal history record information pertaining to me, which may be in the files of any state or local criminal justice agency in Georgia.


Applicant's Signature

2-7-2026
Date



4303 Lawrenceville Road
P.O. Box 39
Loganville, GA 30052

Application for Planning Commission Board Membership

01-15-2026

(PLEASE PRINT)

Date of Application

Lee

Last Name

Address

Phone Number

Michael

First Name

City

Cell Number

F.

Middle Name

State

Zip Code

E-mail Address

Have you been a member of a board or commission with the City of Loganville in the past?

XX

Downtown Development Authority and LDA - 4 years - 2022 to present

Yes

No

If Yes, give dates and name of board

How long have you lived in the City of Loganville?

21 years

Have you ever been convicted of a felony?

No

Yes

No

If Yes Please explain N/A

Education:

High School Stone Mtn High

Course of Study College Prep

Undergraduate College Columbus State Univ

Course of Study Criminal Justice

Graduate/Professional School Columbus State Univ

Course of Study Master of Public Adm

Years Completed HS Diploma - 12

Diploma/Degree HS Diploma - 12

Years Completed 4

Diploma/Degree Bachelor of Science

Years Completed 2

Diploma/Degree Master of Public Adm

Employment:

Employer Retired - Stone Mountain Park

Job Title Asst. Director Public Safety

Work Performed Management, Personnell, Response, coordination with outside agencues

In the space provided, please tell us why you are interested in becoming a member of the board you are applying for. I want to be a part of the organized growth of my city while maintaining its values and core structure to insure that it remains a caring and highly desirable community.

What special skills or experience do you have that may be helpful to us in considering your application. While my background is in public safety, I was involved in fire and safety inspections for a state park. I am very familiar with not only fire and safety codes, but building codes as well. Being able to interpret codes will help me in deciding the applications before the commission.

I hereby authorize the City of Loganville to receive any criminal history record information pertaining to me, which may be in the files of any state or local criminal justice agency in Georgia.


Applicant's Signature

01-15-2026
Date



4303 Lawrenceville Road
P.O. Box 39
Loganville, GA 30052

Application for Planning Commission Board Membership

(PLEASE PRINT)

02/10/2026

Date of Application

Russell

Last Name

Dana

First Name

Reed

Middle Name

Address

City

State

Zip Code

Phone Number

Cell Number

E-mail Address

Have you been a member of a board or commission with the City of Loganville in the past?

X
Yes

No

Loganville Downtown Development Authority 2024-2025
If Yes, give dates and name of board
Loganville Development Authority 2020-2025

How long have you lived in the City of Loganville?

26 years

Have you ever been convicted of a felony?

Yes

X
No

If Yes Please explain _____

Education:

High School Central Gwinnett HS

Years Completed 4

Course of Study NA

Diploma/Degree Diploma

Undergraduate College Presbyterian College

Years Completed 4

Course of Study Psychology

Diploma/Degree BS

Graduate/Professional School GA State Univ

Years Completed 3

Course of Study Public Administration

Diploma/Degree MPA

Employment:

Employer Retired

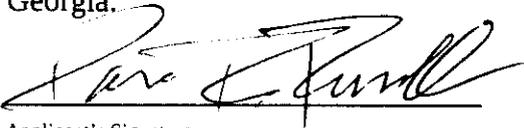
Job Title _____

Work Performed _____

In the space provided, please tell us why you are interested in becoming a member of the board you are applying for. I am excited about the new character based zoning ordinances and how they can improve the course of the City's development. I believe I have the appropriate background and experience to work with the planning department and the rest of the commision to properly apply the new ordinances to proposed development.

What special skills or experience do you have that may be helpful to us in considering your application. My work in leading a state agency providing administrative services to other state agencies has required me to be able to read, understand, and apply the law and other complex rule and regulatory documents similar to the City's zoning ordinances. I also have extensive understanding and experience working with government processes.

I hereby authorize the City of Loganville to receive any criminal history record information pertaining to me, which may be in the files of any state or local criminal justice agency in Georgia.



Applicant's Signature

02/10/2026

Date



4303 Lawrenceville Road
P.O. Box 39
Loganville, GA 30052

Application for Planning Commission Board Membership

(PLEASE PRINT)

3/24/20
Date of Application

PECYLA K
Last Name

KIMBERLY
First Name

JEAN
Middle Name

Address

City

State Zip Code

Phone Number

Cell Number

E-mail Address

Have you been a member of a board or commission with the City of Loganville in the past?

Yes No If Yes, give dates and name of board _____

How long have you lived in the City of Loganville?

6/20/23

Have you ever been convicted of a felony?

Yes No

If Yes Please explain _____

Education:

High School _____	Years Completed _____
Course of Study _____	Diploma/Degree _____
Undergraduate College _____	Years Completed _____
Course of Study _____	Diploma/Degree _____
Graduate/Professional School <u>PMI / Six Sigma</u>	Years Completed _____
Course of Study <u>PROJECT MGMT PROFESSIONAL</u>	Diploma/Degree <u>PROJECT MANAGEMENT PROFESSOR SIX SIGMA BLACK BELT</u>

Employment: RETIRED

Prev Employer ADN

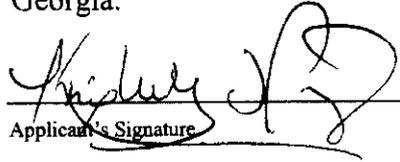
Job Title GLOBAL HEAD OF PORTFOLIO MGMT

Work Performed Owned the discretionary investment process for the firm and lead a global team of project & process professionals

In the space provided, please tell us why you are interested in becoming a member of the board you are applying for. Mostly, I want to learn. I'm a Community-minded individual, serving on LWC, my HOA and also leading my Community's Social Committee- picking it up at a time when spirit was low due to increased dues and assessments I learned a lot and am able to better react to misinformation. I feel the same about the city right now, but don't know enough. This opportunity will give me insight.

What special skills or experience do you have that may be helpful to us in considering your application. I am great with process, so can help make sure our code re-write is supported by a process that reduces the risk of them becoming 'spaghetti' again. I'm a bit of a test master and I care about the city.

I hereby authorize the City of Loganville to receive any criminal history record information pertaining to me, which may be in the files of any state or local criminal justice agency in Georgia.


Applicant's Signature

2/23/24
Date



4303 Lawrenceville Road
P.O. Box 39
Loganville, GA 30052

Application for Planning Commission Board Membership

(PLEASE PRINT)

1/16/2026
Date of Application

Wauters
Last Name

[Redacted]
Address

N/A
Phone Number

Joshua
First Name

[Redacted]
City

[Redacted]
Cell Number

Kyle
Middle Name

[Redacted] [Redacted]
State Zip Code

[Redacted]
E-mail Address

Have you been a member of a board or commission with the City of Loganville in the past?
X Planning Commission (Feb 25 - Current)
Yes No If Yes, give dates and name of board

How long have you lived in the City of Loganville? 8.5 Years
Have you ever been convicted of a felony? X
Yes No

If Yes Please explain _____

Education:

High School _____ Years Completed _____
Course of Study _____ Diploma/Degree _____
Undergraduate College Southern Poly Years Completed 4 Years
Course of Study Civil Engineering Diploma/Degree BS. Civil Eng.
Graduate/Professional School _____ Years Completed Technology
Course of Study _____ Diploma/Degree _____

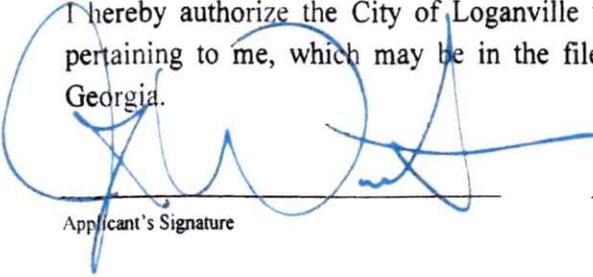
Employment:

Employer CBP Environmental Job Title Sr. Project Manager
Work Performed Management of Multimillion Dollar Environmental Construction Projects

In the space provided, please tell us why you are interested in becoming a member of the board you are applying for. To utilize my knowledge and expertise to benefit our community and to broaden my experience within the local government networks.

What special skills or experience do you have that may be helpful to us in considering your application. Current Planning Commission Board Member. Various and broad experiences within site and building design and development through 15+ years within construction management, development, and civil and structural engineering.

I hereby authorize the City of Loganville to receive any criminal history record information pertaining to me, which may be in the files of any state or local criminal justice agency in Georgia.


Applicant's Signature

1/16/2026

Date