

CITY OF LOGANVILLE Section 5, Item D.

Department of Planning & Devel P.O. Box 39 • 4303 Lawrenceville Road Loganville, GA 30052

770.466.2633 • 770.466.3240 • Fax 770.554.5556

Application # R AS 1006

REQUEST FOR ZONING MAP AMENDMENT
A PETITION TO AMMEND THE OFFICIAL ZONING MAP OF THE CITY OF LOGANVILLE, GEORGIA

	PROPERTY OWNER INFORMATION*
APPLICANT INFORMATION	PROFERITOR (DATE OF COLUMN)
Diane Atha Clay c/o NAME: PRATER CONSULTING LLC	NAME: Diane Atha Clay
	ADDRESS: 4159 Chandler Haulk Rd
ADDRESS: P.O. Box 6 CITY: AUBURN	CITY: Loganville
STATE: GA Zip: 30011	STATE: GA Zip: 30052
PHONE: (404) 757-0889	PHONE: (404) 317-8871
PRONE. (404) 101 coss	(*attach additional pages if necessary to list all owners)
Applicant is: Property Owner Contract Pure	chaser Z Agent Attorney
CONTACT PERSON: TIM PRATER	PHONE: (404) 757-0889
EMAIL: tprater@praterconsultinglic.com	FAX: N/A
PROPER	TY INFORMATION
MAP & PARCEL # PRESENT ZON CO220011A00 ADDRESS: 4159 Chandler Haulk Rd. PROPOSED DEVELOPMENT: No developme You must attach: Application Fee Degal Description	
You must attach: Application Fee Legal Description D'Letter of Intent Site Plan W Names	Flat of Property D Campaign Contribution 5/Addresses of Abutting Property Owners
Pre-Application Conference Date: 2/18/2025 Accepted by Planning & Development:	DATE: 3-5-2.5 FEE PAID: \$500.00
CHECK # 1913 RECEIPT # TAKEN BY: STOATE OF	FLEGAL NOTICE: 4-2-44-75 NEWSPAPER: THE WALTON TRIBUNE
	Approve Approve w/conditions Deny No Recommendation
PLANNING COMMISSION RECOMMISSION	1) DATE: 7/24/25
Commission Chairman: DATE: T12416	
CITY COUNCIL ACTION: Approved Approv	red-w/conditions ☐ Denied ☐ Tabled to ing Commission ☐ Withdrawn
Mayor City Clerk	Date