

RECEIVED

V-20-001

JUN 03 2020

Primary and Secondary Application

(Page 1 of 2)

City of Johns Creek
Community Development

Property Owner/Applicant Information

Property Owner: Emory Johns Creek Hospital Phone: 678-474-7000

Address: 6325 Hospital Parkway
Johns Creek, GA 30097

Email: Laurie.Hansen@emoryhealthcare.org

Applicant: Laurie Hansen Phone: 678-474-7012

Address: 6325 Hospital Parkway
Johns Creek, GA 30097

Email: Laurie.Hansen@emoryhealthcare.org

Contact Person: Laurie Hansen Phone: 770-310-8903

Email: Laurie.Hansen@emoryhealthcare.org

Briefly Describe Variance Request

Emory Johns Creek Hospital would like a variance to finish the exterior
of the first phase of an OR expansion with stucco and a brick water table.

Parcel Information

Assessor's Parcel Identification Number (PIN): 11 098003530160 and 11 098003540318

Land Lot & District: 353,354,355,376,377 of the First District, First Section, Fulton County, GA

Site Address: 6325 Hospital Parkway Johns Creek GA 30097

Subdivision Name (if applicable): _____

Parcel Size: 41.48 acres

Zoning and Land Use

Existing Zoning Designation and Case Number: O-I RZ-18-005

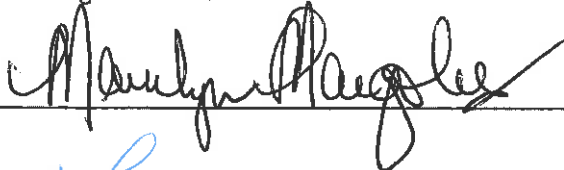
Zoning of Surrounding Properties: (N) N/A (S) O-I (E) MIX (W) R-4, AG-1

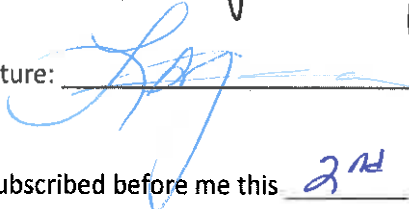
Primary and Secondary Application

(Page 2 of 2)

Notarized Certification

To the best of my knowledge, this variance application form is correct and complete. If additional materials are determined to be necessary, I understand that I am responsible for filing additional materials as specified by the City of Johns Creek Zoning Ordinance.

Owner Signature:  Date: 6-2-20

Applicant Signature:  Date: 6-2-20

Sworn to and subscribed before me this 2nd Day of June 2020

NOTARY PUBLIC:

Signature: 

Email: Andria.Smith@emoryhealthcare.org

Phone Number: 678-474-7003

