

Development Services Center 178 Sams Street Decatur, GA 30030 www.dekalbcountyga.gov/planning 404-371-2155 (o); 404-371-4556 (f)

Chief Executive Officer Michael Thurmond

DEPARTMENT OF PLANNING & SUSTAINABILITY

Interim Director Cedric Hudson

ZONING BOARD OF APPEALS APPLICATION FOR PUBLIC HEARING (VARIANCES, SPECIAL EXCEPTIONS, APPEALS OF ADMINISTRATIVE DECISIONS)

Applica Authori	ant and/or ized Representative:	Rona Swann	and Semelda Hay	nes				
	Mailing Address: 3310 White Castle Drive							
City/State/Zip Code: Decatur, GA 30034								
Email: samona.2.21.21@gmail.com								
Teleph	one Home: 443-60	0-1446	Business: <u>407</u> -	-680-4493	3			
			CORD OF SUBJECT PRO					
Owner	Rona Swann		á.					
Addres	Address (Mailing): 3310 White Castle Drive, Decatur, GA 30034							
Email:	samona.2.21.21@	@gmail.com	Telephone Home: 443-6	00-1446 E	Business: _	407-680-44	493	
ADDRESS/LOCATION OF SUBJECT PROPERTY								
Addres	3310 White C	Castle Drive	City: _De	catur	State:	GA Zip:	30034	
/ tadiot	District(s):	_ Land Lot(s): _	Block:		Parcel: _	506601040		
	Zoning Classification:	R-100	Commission District &	Super District:	3/7			
CHECK TYPE OF HEARING REQUESTED:								
Χ	/ARIANCE (From Development Standards causing undue hardship upon owners of property.)							
	SPECIAL EXCEPTIONS (To reduce or waive off-street parking or loading space requirements.)							
	OFFICIAL APPEAL OF ADMINISTRATIVE DECISIONS.							

PLEASE REVIEW THE FILING GUIDELINES ON PAGE 4. FAILURE TO FOLLOW GUIDELINES MAY RESULT IN SCHEDULING DELAYS.

Email plansustain@dekalbcountyga.gov with any questions.

DEPARTMENT OF PLANNING & SUSTAINABILITY

ZONING BOARD OF APPEALS APPLICATION

AUTHORIZATION OF THE PROPERTY OWNER

I hereby authorize the staff and members of the Zoning Board of Appeals to inspect the premises of the Subject Property.

I hereby certify that the information provided in the application is true and correct.

I hereby certify that I am the owner o	f the property subject to the application.
DATE: 12/04/2025	Applicant Signature:
DATE:	ApplicantSignature:



DEPARTMENT OF PLANNING & SUSTAINABILITY

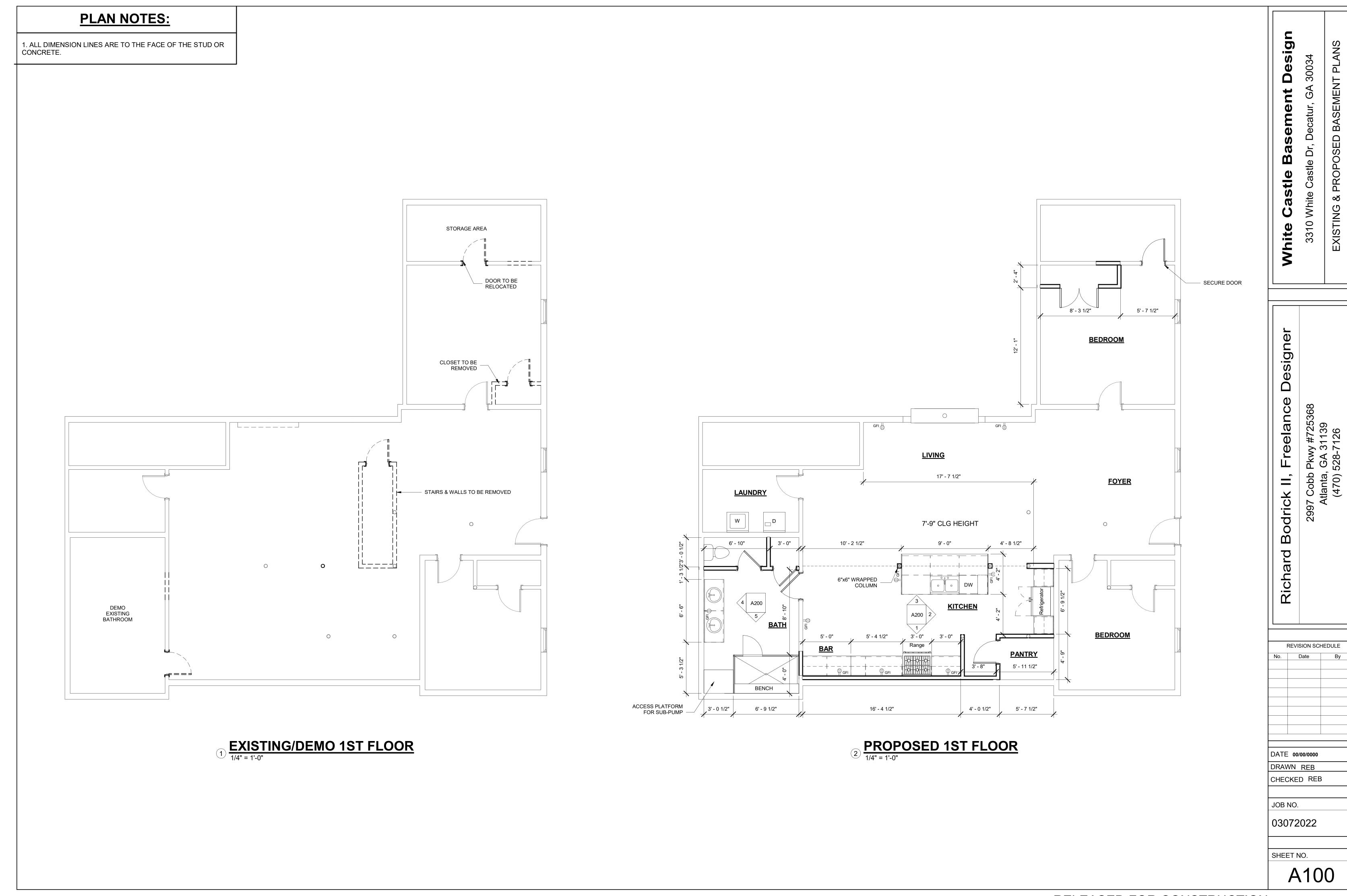
ZONING BOARD OF APPEALS APPLICATION

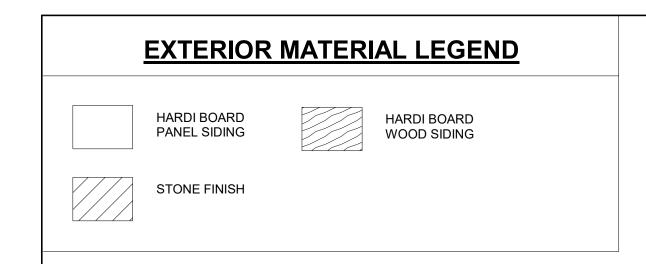
AUTHORIZATION TO REPRESENT THE PROPERTY OWNER

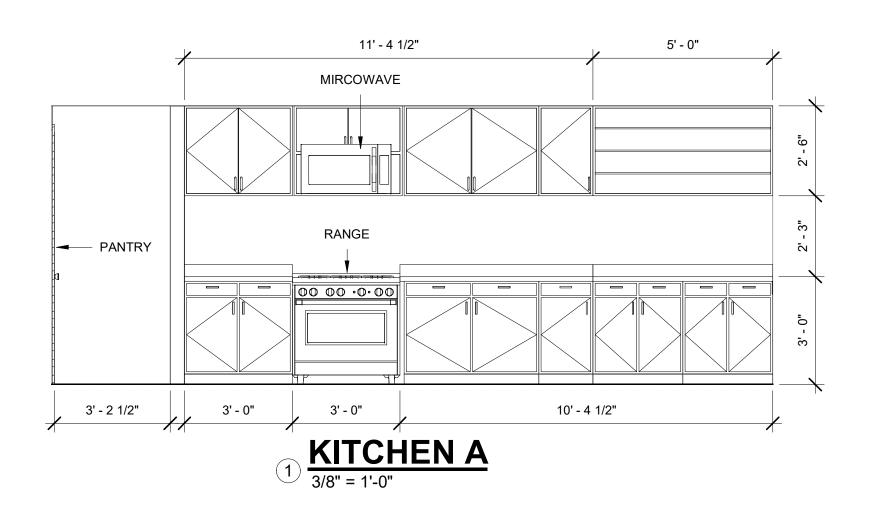
I hereby authorize the staff and members of the Zoning Board of Appeals to inspect the premises of the Subject Property.

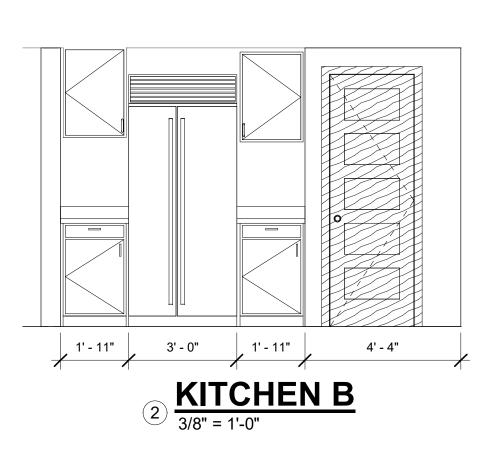
I bereby certify that the information provided in the application is true and correct

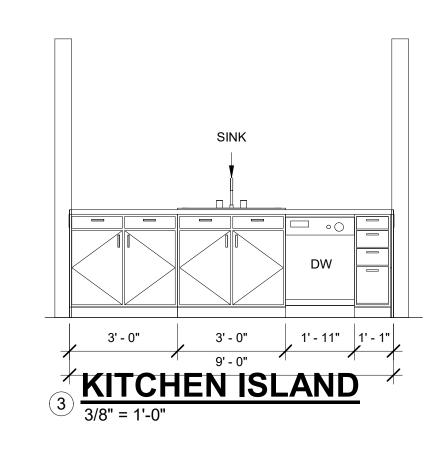
Thereby certify that the information p	rovided in the applic	cation is true and correct.	·
I hereby certify that I am the owner hearing to the ZoningBoard of Appea	als for the requests	as shown in this applicat	tion.
DATE: 12/4/2025	Applicant/Agent Signature:	/ mlla	-16
TO WHOM IT MAY CONCERN:			
(I)/ (WE): Rona Swann			
(Name of Owners)			
being (owner/owners) of the propert signed agent/applicant.	y described below	or attached hereby dele	gate authority to the above
Notary Public	-	Owner Signature	
Notary Public		Owner Signature	
Notary Public		Owner Signature	

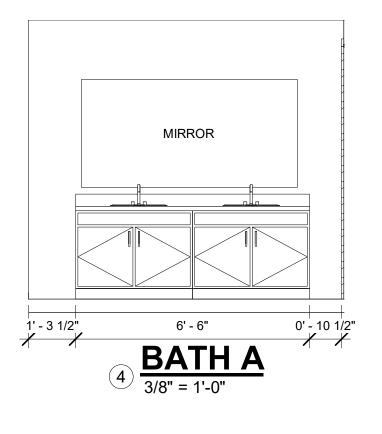


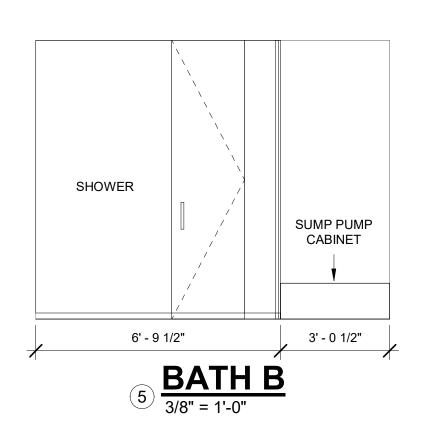












White Castle Basement Design 3310 White Castle Dr, Decatur, GA 30034 INTERIOR ELEVATIONS

Richard Bodrick II, Freelance Designer
2997 Cobb Pkwy #725368
Atlanta, GA 31139
(470) 528-7126

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	REVISION SCHEDULE									
No.	Date	Ву								
DATE	DATE 00/00/0000									
DRAV	DRAWN REB									
CHE	CHECKED REB									
JOB	JOB NO.									
030	03072022									

SHEET NO.

A200