

V-23-094 APPLICATION #:

DATE ACCEPTED 06/07/2023

V-23-094



NOTICE TO APPLICANT

Address of Property:

1835 Indiana AVE NE

City Council District: 5 Neighborhood Planning Unit (NPU): N

Board of Zoning Adjustment (BZA) Hearing Date:

Thursday, August 03, 2023 at 12:00 p.m.

Council Chambers, 2nd Floor, City Hall 55 Trinity Avenue, S.W.

The contact person for NPU N is:

Amy Stout 404-392-3422 npunchair@gmail.com

Contact info for adjacent NPUs is provided below if necessary:

Additional Contacts:

Please contact the person(s) listed above within five days to find out which meetings you will be required to attend before the next NPU meeting. If you are unable to reach the contact person, please call the city's NPU Coordinator at 404-330-6145.

Signed,

Niena McCullum Digitally signed by Niena McCullum Date: 2023.06.08 09:09:34 -04'00'

NM, for Director, Office of Zoning and Development

Allison Bible

Allison Bible

Jun 9, 2023



City of Atlanta Department of City Planning Office of Zoning and Development

55 Trinity Avenue, Suite 3350 Atlanta, Georgia 30303 Phone: 404-330-6145

BOARD OF ZONING ADJUSTMENT (BZA) REFERRAL FORM

DATE FILED: June 7, 2023 V-23-094 APPLICATION NUMBER COUNCIL DISTRICT 5 NPU N **Allison Bible** DATE: 6/7/2023 Name of Applicant SCOPE OF WORK Installation of a pool. Ne 15-211 at 1835 Indiana Ave **Street Address District & Land Lot** Quadrant to be used for **Residential** purposes. The property is zoned **R-5** 2. Prior to the issuance of a Building Permit, the applicant must seek a variance/special exception for the following reasons: 1. Applicant seeks a special exception to allow a recreational use in yard adjacent to street. 2. Applicant seeks a variance to reduce the half-depth front yard from 15 feet to 5.2 feet. The Applicant has not requested additional variances/special exceptions based on application materials submitted. 1982 ZONING ORDINANCE, AS AMENDED Chapter & Section: Chapter 6 Section 16-28.008(6) Chapter & Section: Chapter 7 Section 16-07.008 (1) & Chapter 28 Section 16-28.007(5)(b) Chapter & Section:

Andrew Beasley

Plan Reviewer

6/7/2023

Date

Allison Bible 6/7/23
Applicant

Date

APPLICATION FOR BOARD OF ZONING ADJUSTMENT

	irk "X" next to the type o	f application	on(s) you are submitti	ng: V-23-094
	Variance		X	OFFICE OF ZONING & DEVELOPMENT
	Special Exception Variance & Special Exce	ntion		
	variance & Special Exce	huon		RECEIVED
Date Filed 6.7.2023			Application Number _	DATE: <u>6/7/2023</u>
Name of Applicant Allison	Bible	Daytin	ne Phone 404-556	6-0767
Company Name (if applicable)			email abworks40	@gmail.com
Address 1463 Sylvan (Circle NE Brook	haven,	GA 30319	
street		city	state	zip code
Name of Property Owner Key				1-4308
Address 1835 Indiana	Ave NE Allania	, GA 30		
street		city	state	zip code
Area: TOTAL AREA - 8,565 SQ. FT. or 0.1966 ACRES Lot: Property is zoned: R-5	211 District: <u>15</u> , Council District: <u>5</u>	, <u>C</u> , Neiş	DeKalb ghborhood Planning U	County, GA. nit (NPU): N
TO THE BOARD OF ZONING Office of Zoning and Development that the Board of Zoning Adjust I hereby authorize the staff of described property. I understant to the instructions given to me that all statements herein and at Sworn To And Subscribed Before	ment prior to seeking a buttment grant a Variance or the Office of Zoning and that it is my responsibility the Office of Zoning attached hereto are true and	ilding pern Special Ex d Developi ty to post a and Develo l correct to	ment to inspect the propublic notice sign on topment upon filing this the best of my knowle When the	remises of the above- he property according application. I swear dge and belief. for Owner (Applicant) stein
Sworn To And Subscribed Before Market Public	ore Me This Day Of	<u> </u>	COMPANY OF THE PARTY OF THE PAR	NOTARL THE



SUMMARY & JUSTIFICATION FOR VARIANCES

Directions: Complete responses must be provided for ALL questions. Incomplete applications will not be
accepted. The space below may be utilized or responses may be submitted as a separate attachment. Specific
criteria for Board approval of variances may be found on page 7. The justification must address the criteria.
Please submit a typewritten or legible justification.
Is the property described in this application subject to a pending application or ordinance for a Pezoning or

releva Sumn criter	nary of proposed construction changes to buildings or site (shall not replace submittal of written ia). (Examples: "Convert a 100' x 200' retail space into a restaurant." "Install a 6-foot high opaque woods 'privacy fence' with 6-foot high opaque wall gates.").
Installati	ion of a pool in the backyard while protecting the 43" oak landmark tree. A small retaining wall will be required to install on the side yard. The requesting a 1/2 depth front reduction from 15' to 5.2' is being requested.
compl	osed Lot Coverage (After Construction): Calculate total amount of lot coverage on entire property, after etion of proposed construction, including existing and proposed buildings and other structures; sidewalk ways, parking pads, patios, gravel, etc.; everything except natural planted or undisturbed areas.
3,538	covered square feet / 8.565 total lot square feet = 41.3 % proposed lot coverage
50	% maximum allowed lot coverage
Varia	nce Criteria (see page 6 for detailed criteria):
1)	What are the extraordinary and exceptional conditions pertaining to the particular piece of property in question (size, shape or topography)? The property is a corner lot located in the Lake Claire neighborhood. The size of the lot is quite small and has maxed out the building lines. There is a large 43" oak landmark tree that renders most of the yard useless without impacting the CRZ
	The lot sits below street level and below the neighbors in the rear yard as well.
2)	How would the application of the Zoning Ordinance of the City of Atlanta to this particular piece of property create an unnecessary hardship? The 43° oak tree is the biggest hinderance of the property. The CRZ takes over 75% of the backyard and we are very mindful of protecting this tree. The homeowners have a son diagnosed with ADHD and Adjustment Disorder (Sensory Processing) that requires a high level of activity and stimulation. Being able to build a pool would help tremendously with his mental health and treatment plans.
	The child has been doing Occupational Therapy since he was 2 years old. Swimming has always been suggested by his doctors as a part of his Sensory Diet to help teach him to self-regulate his body and mood.
3)	What conditions are peculiar to this particular piece of property?



AUTHORIZATION BY PROPERTY OWNER

(Required only if the applicant is not the owner of the property subject to the proposed application.)

(Please print clearly. Must be the original document. A copy will not be accepted.)

I, Kevin Goldstein	(OWNER'S NAME	E) SWEAR AND AFFIRM THAT I AM
THE OWNER OF THE PROPER		(PROPERTY
ADDRESS). AS SHOWN IN TH		
WHICH IS THE SUBJECT M.	ATTER OF THE ATTACHEI	O APPLICATION. I AUTHORIZE THE
PERSON NAMED BELOW TO I	FILE THIS	
APPLICATION AS MY AGENT.		
NAME OF APPLICANT:		
LAST NAME Bible	FIRST NAM	E Allison
ADDRESS 1463 Sylvan C	Circle NE	SUITE_
CITY Brookhaven	STATE GA	ZIP CODE 30319
OWNER'S TELEPHONE NUMB	_{ER:} 334-221-4308	
Ku In		
SIGNATURE OF OWNER		
Kevin Goldstein		
PRINT NAME OF OWNER		
		이 마음을 모르면 됐습니다. 이 얼마나 얼마나 없었다.

PERSONALLY APPEARED BEFORE ME THE ABOVE NAMES, WHO SWEARS THAT THE INFORMATION CONTAINED IN THIS AUTHORIZATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.

NOTARY PUBLIC

DATE



Patient Name: August GOLDSTEIN Date of Birth: 11/12/2015

Referring Physician: Deneta Sells MD

PediaSpeech Services, Inc.- Decatur 495 Winn Way Suite 210 Decatur GA 30030-1736 Tel: (770) 209-9826 Fax: (770) 209-9876



This suggests that August needs increased sensory activities to 'wake up' his central nervous system to be able to maintain the appropriate arousal level to be able to attend to tasks, learn new skills, and refine the skills that he has already learned.

ASSESSMENT

Diagnosis

Medical Diagnoses

1. R27.8: Other lack of coordination

Treating Diagnoses

1. R27.8: Other lack of coordination

2. F88: Other disorders of psychological development

V-23-094



Summary

Summary of Findings: August is a sweet, 5 year 2 month old boy with an excellent support system. August was re-assessed today to determine his progress and continued need for OT services. August has made significant improvements, however, he continues to require skilled OT intervention to integrate retained primitive reflexes and provide adequate sensory opportunities so that August can continue to improve upon impulse control, participation, and performance in learning new and refining age appropriate tasks.

RESULTS:

Results of this evaluation are derived from clinical observations, parent interview, and standard assessment (PDMS-2, Sensory Profile-2).

PDMS-2 Results indicate that August has made significant improvements from a raw score of 46 in grasping to now 50 in grasping. Improvements are due to improved ability to manage buttons and hold writing utensils with a tripod grasp. His visual motor integration skills also improved from a raw score of 129 to now 138. Improvements are due to improved attention to cutting shapes, improved ability to fold paper, and improvements in imitating block designs indicating improved problem solving skills.

Sensory Profile 2 results indicate that August requires more sensory input than his peers to understand and interact with his environment. Currently, August's central nervous system is not accurately responding to the sensations in his environment, therefore, he requires increased input to both manage his arousal level, and better understand the sensations in his

V-23-094



treatment plan to ensure that deficits do not impede finh academicany and in day-to-day functioning.

While ADHD and sensory processing difficulties undoubtedly contribute to emotional and behavioral dysregulation, his presentation may not fully be explained by this diagnosis. In particular, his parents and teacher reported defiance, strong emotional responses, and aggression, which are more severe in the home. Additionally, information provided is suggestive of mild anxiety, which may have contributed to his reluctance to engage in challenging tasks during the evaluation, as evidenced by whining and asking for his mother. However, he is reported to be generally happy. Moreover, individuals with ADHD often have social difficulties, as they fail to recognize the impact of their behavior on others. This appears to be the case for August, and, while I would expect social functioning to continue to improve as ADHD symptoms are better managed, social skills training may be beneficial in improving these skills and ensuring that difficulty in peer interactions does not impact his self-concept. Overall, given that symptoms do not appear to be severe, a diagnosis of an Adjustment Disorder is most appropriate. While I would expect him to make marked improvement in response to interventions to address ADHD, therapy can be beneficial in addressing behavioral and emotional symptoms.

DIAGNOSTIC IMPRESSIONS (ICD-10)

Based on a comprehensive review of August's background and history, along with this comprehensive assessment of his cognitive and neurological symptoms, self- and observer-reports, and behavioral observations, the following diagnoses are warranted based on the Diagnostic and Statistical Manual of Mental Disorders, 5th Edition (DSM-5) diagnostic criteria:

F90.2 Attention-Deficit/Hyperactivity Disorder, Combined Presentation

F43.25 Adjustment Disorder, with mixed disturbance of emotions and conduct

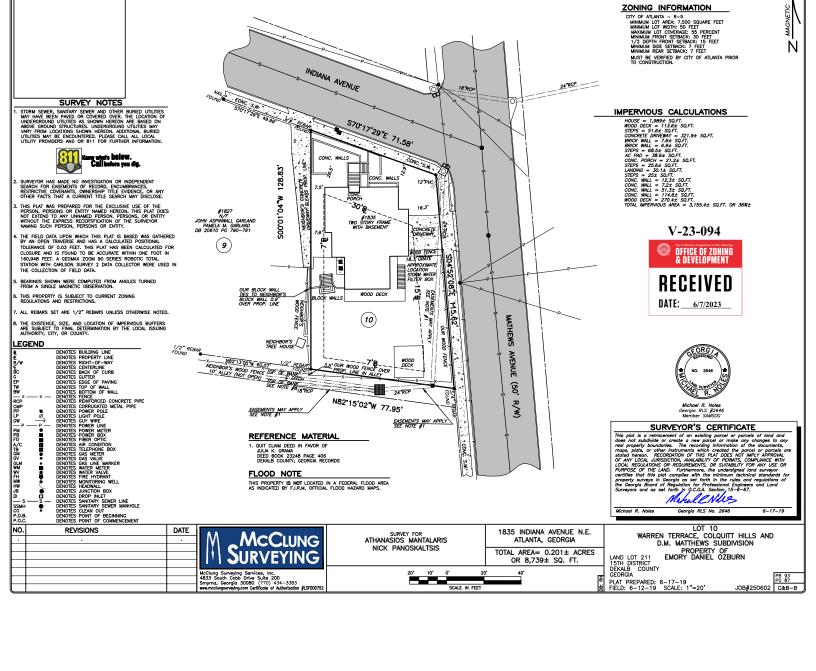
Sensory processing issues

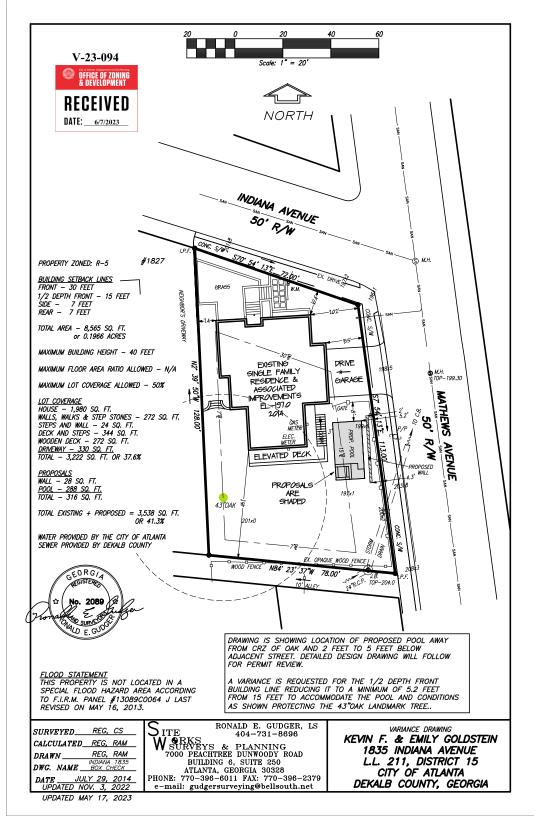
RECOMMENDATIONS

- Results of this evaluation should be shared with August's doctor, therapist, school, and anyone else involved
 in his care in order to aid in treatment planning. A medication consultation is recommended to determine if
 he would benefit from pharmacological interventions to address ADHD symptoms.
- 2. Based on the results of this evaluation, August should be considered for special education services to ensure that his ADHD, sensory processing deficits, and dysregulation are adequately addressed. Upon beginning school, he would benefit from initiation of the school-based Student Support Team (SST) process in which interventions are implemented to target specific areas of weakness. His response to such interventions should be monitored to determine the need for a 504 Plan or an Individual Education Plan (IEP) to ensure that he is receiving necessary services.

Confidential Report: August Goldstein

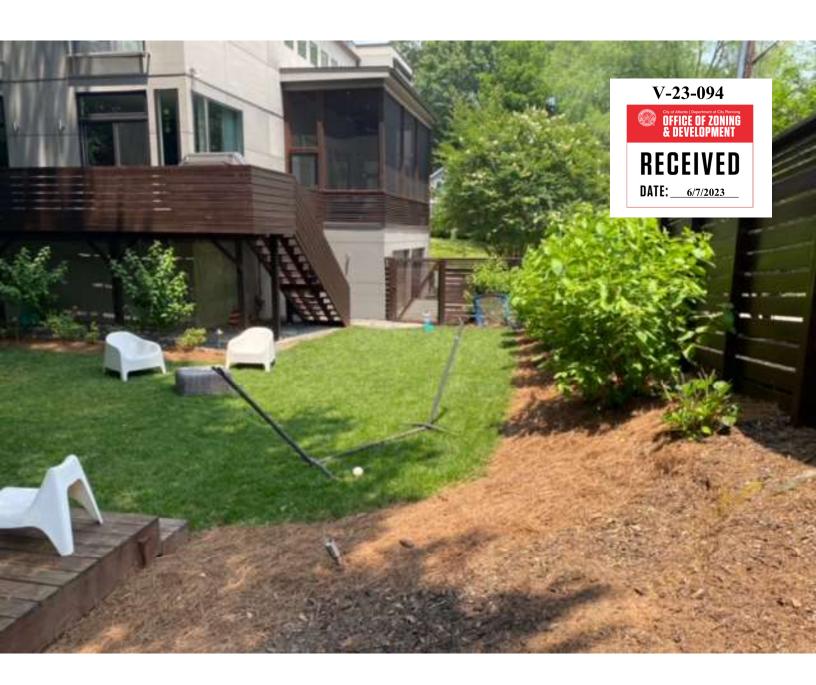
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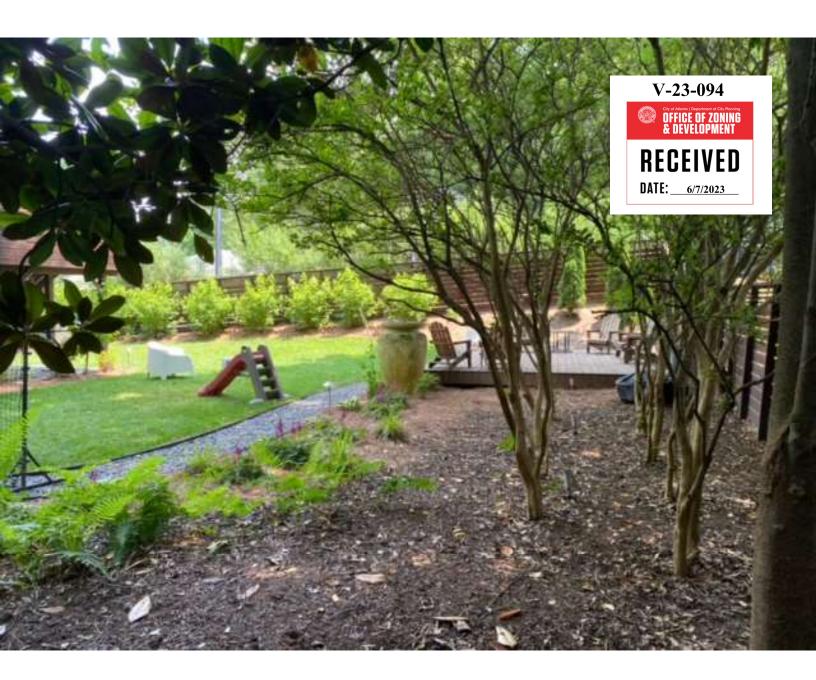


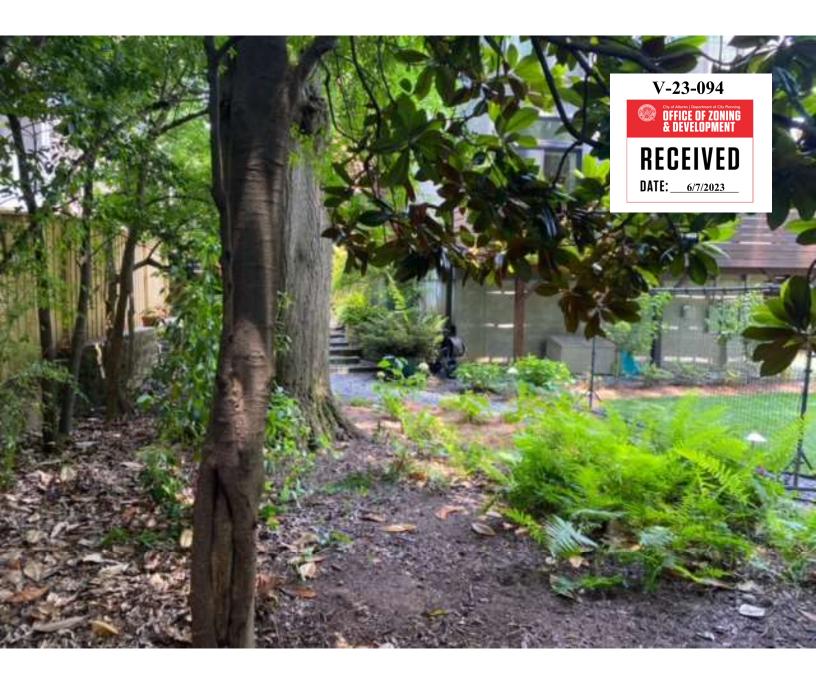




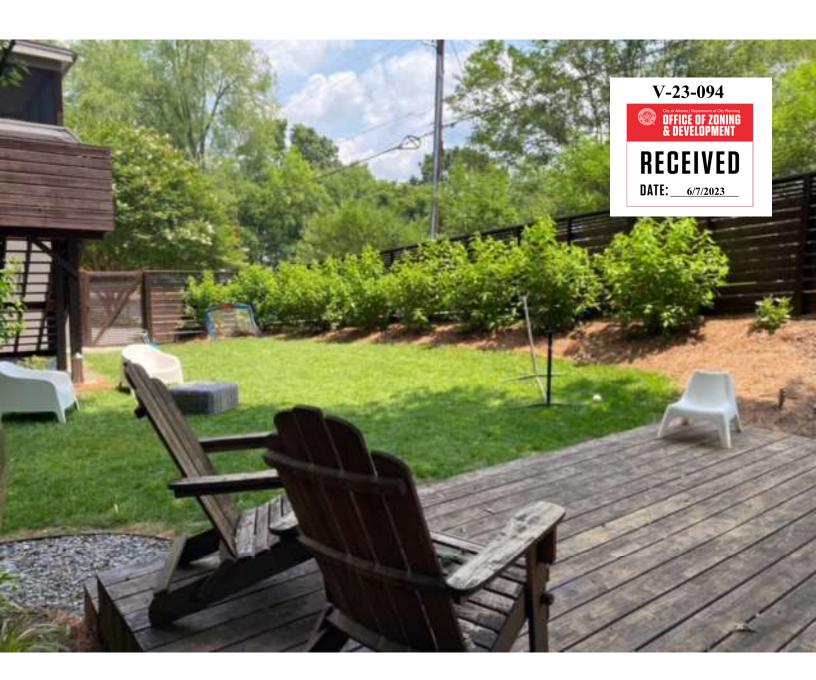


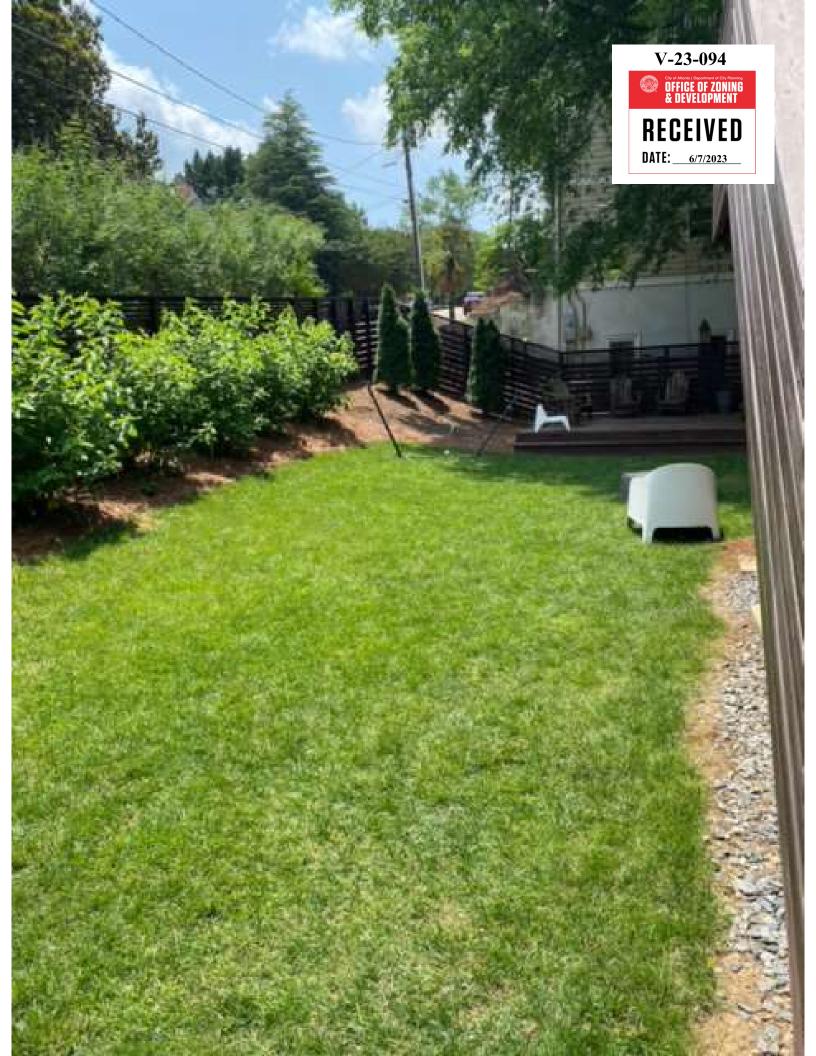








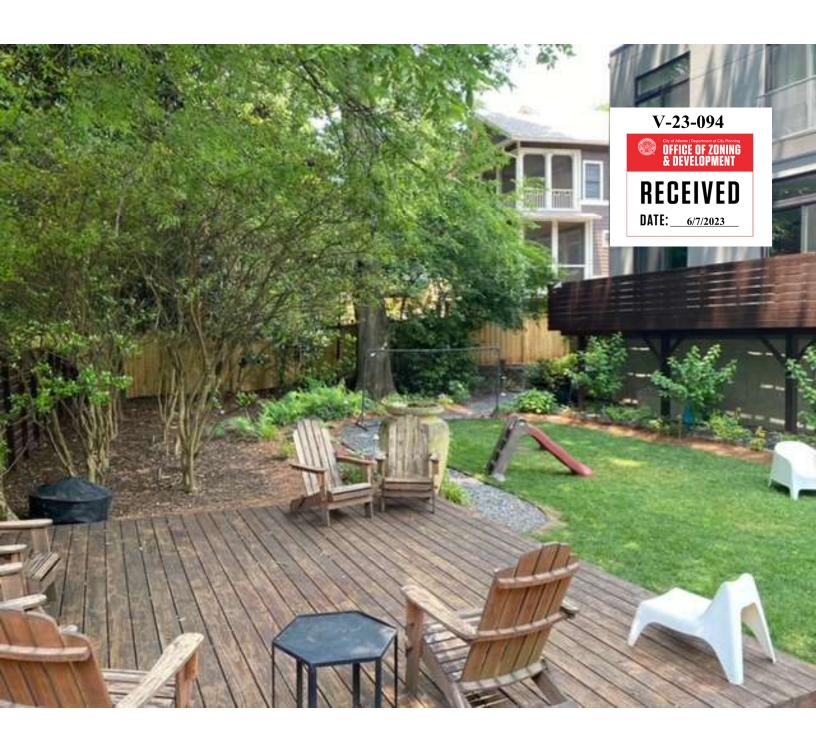


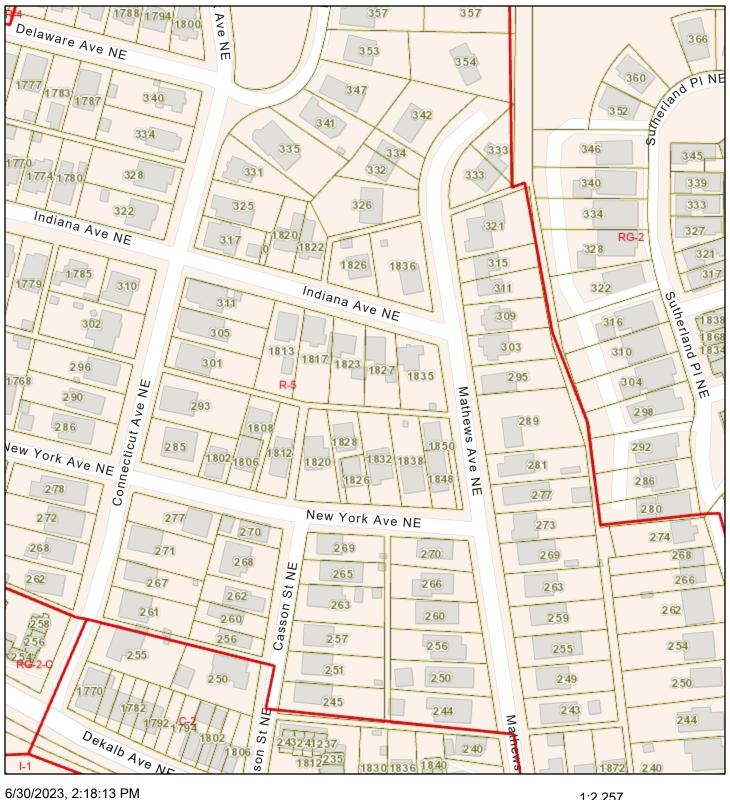








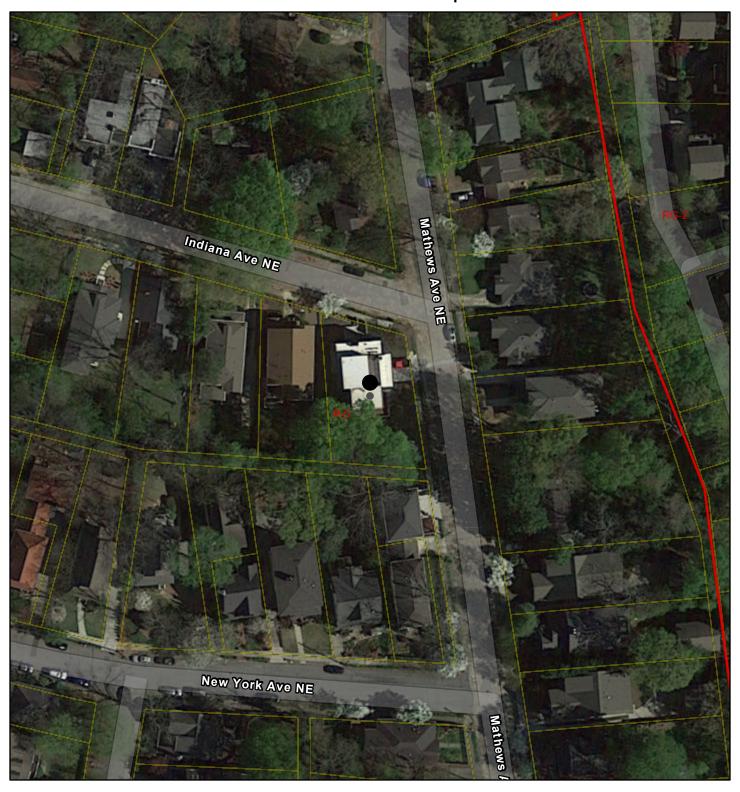


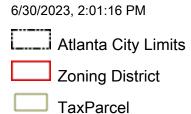


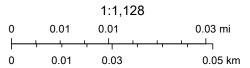


Address Point

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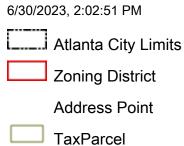






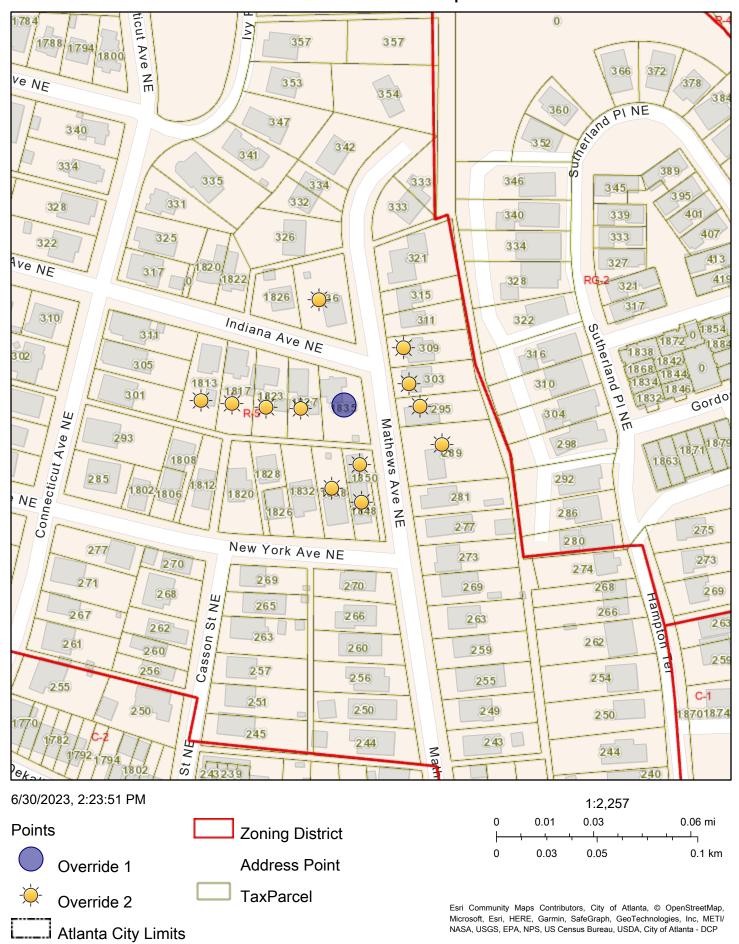
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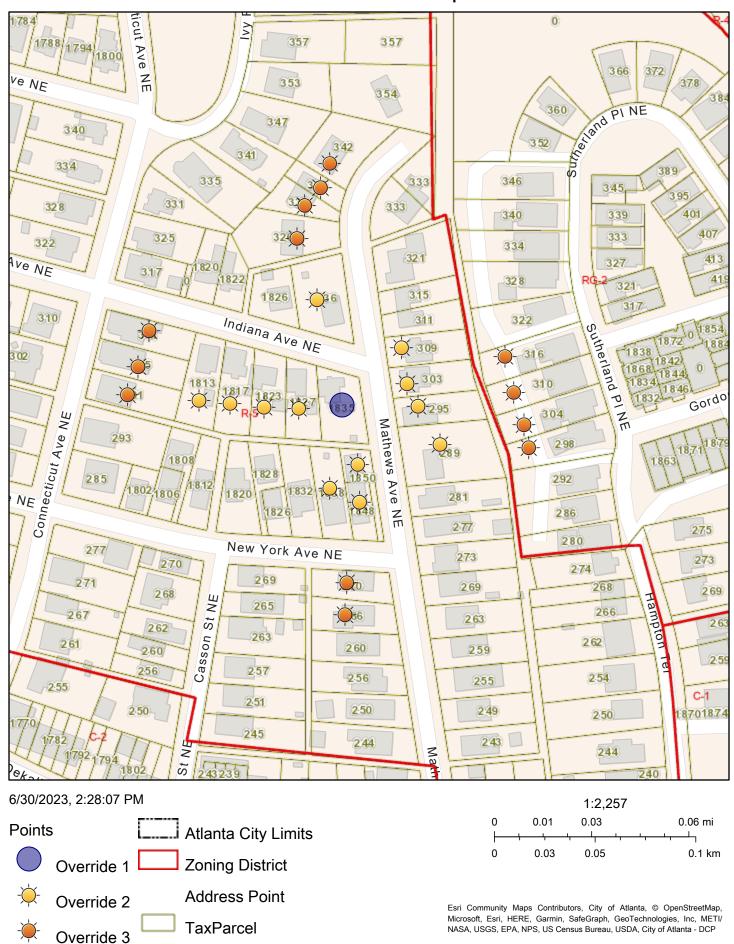






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AB Works – Allison Bible 1463 Sylvan Circle NE Brookhaven, GA 30319 404-556-0767 Abworks40@gmail.com

On behalf of Kevin & Emily Goldstein 1835 Indiana Ave Atlanta, GA 30307 334-221-4308 / 785-218-6210 kfgold@gmail.com / Emily.reimer@gmail.com

June 30, 2023

Re: Proposed Pool for 1835 Indiana Ave / V-23-094

Dear Neighbor,

The Goldstein family is seeking to build a pool in the backyard while protecting the 43" oak landmark tree. A small retaining wall will be required to be installed in the side yard of Mathews Ave.

Their son has Attention Deficit Hyperactive Disorder (ADHD) and Sensory Processing Disorder in which he has been doing Occupational Therapy since he was 2yo. Swimming has always been suggested by his doctors as a part of his Sensory Diet to help teach him to self-regulate his body and mood, as well as learn to move his body more seamlessly.

The other hardship being the very large Oak Tree taking up the rest of the yard. And they, being the mindful, conscientious, and eco-friendly people that they are, would never want to do anything to disrupt the critical rootzone of that historical and uber important tree.

These plans require a variance because of the size and shape of the yard and the extensive critical root zone of the 43" oak landmark tree. To minimize the critical root zone impact, they are proposing to hug the pool as close to the side yard as possible. It will sit below the street level and have one 4' or two 2' tiered retaining walls incorporated into the pool design. Per code, no wall will be higher than 4'.

These plans will be presented first at the Thursday, July 20th, meeting of the Lake Claire Neighbors (LCN). That meeting will be held via Zoom at 7:15pm. After that, these plans will be presented at the Neighborhood Planning Unit – N (NPU-N) meeting on Thursday, July 27th, at 7pm, via Zoom.

Should you have any questions about this project, please feel free to contact us at the contact information listed above.
Sincerely,
Allison Bible
Acknowledgement of Notification:
I have been made aware of variance request V-23-094 and given the opportunity to comment on the proposal.
I have additional questions.
I have been informed but have no opinion.
Signature of LCN member
Printed Name of LCN member
Address of LCN member

Should you have any questions about this project, please feel free to contact us at the contact information listed above.

Sincerely,

Allison Bible

Acknowledgement of Notification, please place a check mark next to your selection:

JI am in support of variance request V-23-094.

I have additional questions.

I have been informed but have no opinion.

Signature of Neighbor

Michael Gerber

Printed Name of Neighbor

305 Connected Ale NE

Address of Neighbor

Should you have any question contact information listed abo	s about this project, please feel free to contact us at the ve.
Sincerely,	
Allison Bible	

Acknowledgement of Notification, please place a check mark next to your selection:

I am in support of variance request V-23-094.

I have additional questions.

I have been informed but have no opinion.

anula M. Suland Signature of Neighbor

Pamela Garland

Printed Name of Neighbor

1827 Indiana Nenue

Address of Neighbor These plans requires worthing the party and showed the rest and the extensive Should you have any questions about this project, please feel free to contact us at the contact information listed above.

Sincerely,

Allison Bible

Acknowledgement of Notification:

- I have been made aware of variance request V-23-094 and given the opportunity to comment on the proposal. 1 support 1/W
- I have additional questions.

X I have been informed but have no opinion.

Signature of LCN member

Printed Name of LCN member

1817 Indiana Are NE, HM, GA 30307

Address of LCN member

Allison Bible	
	334-221-4308 / 785-218-6210
	Mental Came de London A Suntane Contra de London
Acknowledgement of Notification pl	lease place a check mark next to your
selection;	
	June 30, 2023
Lam in support of variance request	Eus Proposed Pool for 1835 Indiana Ave / V-23-094
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