



Planning & Urban Design
20 Interchange Drive, Administration Bldg.
Savannah, GA, 31415
Phone: 912.525.2783/Fax: 912.525.1562
www.savannahga.gov/planning

26-002006-2BA



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APR 17 2026



Zoning Board of Appeals Application

110 E State St, Savannah, GA, 31401
P.O. Box 8246, Savannah, GA, 31412-8246
Phone: 912.651.1440 / Fax: 912.651.1480
www.thempc.org

Please type or print legibly. Attach additional sheets, if necessary, to fully answer any of the following sections. Incomplete applications shall not be scheduled by the Metropolitan Planning Commission (MPC) until deficiencies are corrected. Additional instructions and information regarding the amendment process are attached. **SUBMIT AN ELECTRONIC COMPLETED APPLICATION AND SUPPLEMENTAL DOCUMENTATION TO PLANNING@SAVANNAHGA.GOV.** Applicants shall contact the MPC staff at 912.651.1440 prior to submitting an application.

I. Subject Property

Street Address(es): 309 W Bolton Street

Property Identification Number(s) (PINs) (Note: Attach a boundary survey, recorded or proposed plat, tax map or scaled plot plan to identify the property boundary lines.): 20052 03003

Total acreage or SF of the subject property: .15

Zoning District(s): TN-1

Existing land use(s) for the subject property (e.g., undeveloped, restaurant, auto repair shop, multi-family):

Residential

II. Reason for Variance (Check all that apply and attach a response and supporting documentation for each item checked).

☒ **A. REQUEST A VARIANCE (Sec. 3.21).** The application must be submitted to provide an opportunity for the ZBA to grant variances only from the building standards for permitted uses in the base zoning districts (not to include density or vehicular access) in Article 5.0, Base Zoning Districts; variable standards in Article 9.0, General Site Standards; and variable standards in Article 10.0, Natural Resource Standards. Refer to Page 6 for plot plan criteria and explain specifics of request (e.g., To request a 5 foot reduction of the 25 foot rear yard setback). **Describe the variance requested:** Allow an increase in maximum height and allow an increase in the maximum footprint for an ADU. The structure is existing and was built in 2014 under the original permit, but the interior improvements of the ADU were not completed at the time. Zoning requirements were amended since the original permit application and a recent building permit application was denied based on the current zoning requirements of 25' maximum height and the ADU area not greater than 40% of the main house footprint. The existing height of the ADU is 29'-8" and the main house is 36'-8". The existing footprint under roof of the ADU is 54% of the main house under roof. Additional attachment provided.

☐ **B. APPEALS (Sec. 3.23).** An appeal by any aggrieved party may be taken to the ZBA when an alleged error in a final written decision of any administrator, commission or board authorized to make a final written decision occurs. An application must be filed within thirty (30) working days of a final written decision. It will be considered filed when a complete notice of appeal is submitted to planning@savannahga.gov. **Provide an explanation specifying the grounds for the appeal with the ZBA and the administrator, commission or board whose decision is being appealed:**

☐ **C. RELIEF FOR NONCONFORMING USES AND STRUCTURES (Sec. 3.24).** An application must be submitted to request a re-establishment, expansion, or reconstruction of a nonconforming use. **Indicate the type of non-conformity and relief sought.**

☐ **D. REQUEST AN EXTENSION OF A ZBA APPROVAL.** If a ZBA decision needs to be extended, an application must be submitted. Date of ZBA Approval: File No.:

III. Application History.

- Have any previous applications been made regarding the subject property?
☐ Yes ☒ No If yes, please provide the file number(s): _____
- Is this request related to another review, such as a Certificate of Appropriateness (COA), Subdivision, Site Development Permit or Plan, Master Plan, Business Location Approval, Rezoning, or Text Amendment? If so, please provide the Plan/Permit # _____ and associated Staff Report/Decision.

IV. Property Owner Information

Name(s): Ellen Harris Wikstrom

Registered Agent: _____
(Or Officer or Authorized Signatory, if Property Owner is not an individual. Provide GA Annual Registration.)

Address: 337 Ellis Point Road

City, State, Zip: Aurora, NY 13026

Telephone: _____ Fax: _____

E-mail address: _____

V. Petitioner Information, if different from Property Owner (Note: If the property owner(s) will have an agent serve on his or her behalf, the owner(s) must complete the attached Letter of Authorization. If the agent changes after submitting the application and the agent is not the property owner, a new authorization form will be required.)

Name(s): Jeff Whitlow

Registered Agent: _____
(Or Officer or Authorized Signatory, if Petitioner is not an individual)

Address: 1614 E 51st Street

City, State, Zip: Savannah, GA 31404

Telephone: _____ Fax: _____

E-mail address: _____

VI. Agent, if different from Property Owner (Note: A signed, notarized Letter of Authorization from the property owner is required and must be attached if this section applies. If the agent changes after submitting the application and the agent is not the property owner, a new authorization form will be required. Please refer to VIII. Letter of Authorization.)

Name(s): _____

Firm or Agency: _____

Address: _____

City, State, Zip: _____

Telephone: _____ Fax: _____

E-mail address: _____

VII. Application Fee:

The non-refundable filing fee is based on the type of use for which relief is requested. Make check payable to City of Savannah.

- ☒ Residential: \$620.00
- ☐ Non-residential: \$1,300.00

VIII. Letter of Authorization

As fee simple owner of the subject property that is identified as Property Identification Number(s) (PIN) 20052-03003, I ~~(we)~~ authorize Jeff Whitlow (Agent Name) of Whitlow Construction (Firm or Agency, if applicable) to serve as agent on my (our) behalf for the purpose of making and executing this application for the proposed request. I ~~(we)~~ understand that any representations(s) made on my ~~(our)~~ behalf, by my ~~(our)~~ authorized representative, shall be legally binding upon the subject property.

Property Owner(s)

Name(s): Ellen Baker Wikstrom

Registered Agent: N/A
(Or Officer or Authorized Signatory, if Property owner is not an individual)

Ellen Baker Wikstrom 22 April 2020
Signature(s) Date

Witness Signature Certificate

State of ~~Georgia~~ New York

County of Cayuga

Signed or attested before me on April 22nd 2020 by Ellen Wikstrom
Date (Printed name(s) of individual(s) signing document)

who proved to me on the basis of satisfactory evidence to be the person(s) who appeared before me.

 Personally Known or ☒ Produced Identification Type of ID NY State Dr. Lic.

Joelle Cooper
Signature of Notary Public

JOELLE COOPER
Notary Public, State of New York
No. 01CO6089189
Qualified in Cayuga County
Commission Expires March 17, 2027

Joelle Cooper
(Name of notary, typed, stamped or printed)
Notary Public State of ~~Georgia~~ New York
My commission expires: March 17th 2027

IX. Application Checklist

Pursuant to O.C.G.A. § 8-2-26, this checklist must be completed and submitted with each application. Please check every item as either "Y" for items that are included with the application or "N" for items that are not included with the application. Items without an "N" checkbox are minimum requirements initially due with the application if applicable.

Yes No

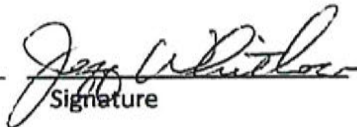
- ☒ Part I. Subject Property
- ☒ Part II. Reason for Variance
- ☒ Part III. Application History
- ☒ Part IV. Property Owner Information
- ☒ ☐ Part V. Petitioner Information
- ☐ ☒ Part VI. Agent
- ☒ Part VII. Application Fee
- ☐ ☒ Part VIII. Letter of Authorization
- ☒ Part IX. Complete Application Checklist
- ☒ Part X. Certified Application (Signed application)
- ☒ ☐ A scaled dimensioned map, plat or sketch of the subject property referred to in the application
- ☐ ☒ Concept Plan of the proposed development if applicable

Please note: Supplemental information may be required during plan review to address deficiencies.

X. Certified Application

By my signature below, I certify that the information contained in this application is true and correct to the best of my knowledge at the time of the application. I acknowledge that I understand and have complied with all of the submittal requirements and procedures, and that this application is a complete application submittal. I further understand that an incomplete application submittal may cause my application to be deferred to the next posted deadline date. I understand that the approval of an application for Special Use Permit by The Mayor and Aldermen does not constitute a waiver from any applicable local, state, or federal regulations.

Applicant Name: Jeff Whitlow
Print


Signature

04-20-26
Date

Contacts

Planning & Urban Design: 20 Interchange Drive, Administration Building
Savannah, GA, 31415
P.O. Box 1027, Savannah, GA, 31402 (Phone: 912.525.2783)

The Planning Commission: 110 E State St, Savannah, GA, 31401 (Located at the State Street Garage)
P.O. Box 8246, Savannah, GA, 31412 (Phone: 912.651.1440)

On a separate attachment explain how the requested variance(s) satisfies one or more of the following criteria: •General Consistency: The variance shall be consistent with the intent of the Zoning Ordinance and the Comprehensive Plan and shall not be injurious to the neighborhood or otherwise detrimental to the public health, safety or welfare. •Special Conditions: oSpecial conditions and/or circumstances exist which are peculiar to the land, buildings or structures involved and which are not applicable to other lands, buildings or structures in the same zoning district. oThe special conditions and/or circumstances do not result from the actions of the applicant. oThe Special conditions and/or circumstances are not purely financial in nature so as to allow the applicant to use the land, buildings, or structures involved more profitably or to save money. •Literal Interpretation: Literal interpretation of the provisions of the regulations would deprive the applicant of rights commonly enjoyed by other properties in the same zoning district under the terms of the Ordinance and would result in unnecessary and undue hardship on the applicant. •Minimum Variance: The variance, if granted, is the minimum variance necessary to make possible the reasonable use of land, buildings or structures. •Special Privilege Not Granted: The variance would not confer on the applicant any special privilege that is denied by this Ordinance to other lands, buildings or structures in the same zoning district.

An ADU is permissible by zoning and therefore meets general consistency of the zoning intent. The special condition is the structure is existing and was built in 2014 consistent with zoning requirements at the time, to include height and relative footprint to the main house. The existing structure was constructed by the approved/permitted plans that were duly closed, thus indicating compliance with the permit. The literal interpretation of the zoning requirement for the ADU would require partial demolition of the existing structure and major modifications that are economically unfeasible and unreasonable to expect of the owner.

[illegible]

ADU

PLAT OF LOT 64, LLOYD WARD,
SAVANNAH, CHATHAM COUNTY, GEOR

