First Amended REZONING/SUP/CHANGE IN CONDITIONS APPLICATION

APPLICANT INFORMATION	OWNER INFORMATION				
NAME: Toll Bros. Inc.*	NAME: The Item IV Marital Trust UW AJ Embry				
ADDRESS: 240 Lakeview Pkwy, Ste 650	ADDRESS: 10555 Embry Farm Rd.				
_{CITY:} Alpharetta	CITY: Johns Creek				
STATE: GA ZIP: 30009	STATE: GA ZIP: 30097				
PHONE: 941-713-1845	PHONE:				
CONTACT PERSON: Dennis J. Webb, Jr.	PHONE: 404-815-3620				
CONTACT'S E-MAIL: dwebb@sgrlaw.com					

APPLICANT IS THE:					
X OWNER'S AGENT X PROPERTY OWNER X CONTRACT PURCHASER					
PRESENT ZONING DISTRICTS(S): AG-1 REQUESTED ZONING DISTRICT: CUP					
DISTRICT/SECTION: 1/1 LAND LOT(S):ACREAGE: 204.10					
ADDRESS OF PROPERTY: 10505, 10555, 10655 Embry Farm Road					
PROPOSED DEVELOPMENT: Planned Residential Community					
CONCURRENT VARIANCES:					
ADDRESS OF PROPERTY: 10505, 10555, 10655 Embry Farm Road PROPOSED DEVELOPMENT: Planned Residential Community					

NON-RESIDENTIAL DEVELOPMENT			
No. of Buildings/Lots:			
Total Building Sq. Ft.			
Density:			

Received July 15, 2025 RZ-24-0010 Planning & Zoning

^{*}Toll Bros. Inc. files this application as agent for and on behalf of The Item IV Marital Trust UW AJ Embry

DISCLOSURE REPORT FORM

WITHIN THE (2) YEARS IMMEDIATELY PRECEDING THE FILING OF THIS ZONING PETITION HAVE YOU, AS THE APPLICANT OR OPPONENT FOR THE REZONING PETITION, OR AN ATTORNEY OR AGENT OF THE APPLICANT OR OPPONENT FOR THE REZONING PETITION, MADE ANY CAMPAIGN CONTRIBUTIONS AGGREGATING \$250.00 OR MORE OR MADE GIFTS HAVING AN AGGREGATE VALUE OF \$250.00 TO THE MAYOR OR ANY MEMBER OF THE CITY COUNCIL.

CIRCL	E ONE: YES (if YES, o	complete points 1 thro	ough 4);	NO	O (if NO, comple	te only point 4)			
1.	CIRCLE ONE: Party to Petition (If party to petition, complete sections 2, 3 and 4 below) In Opposition to Petition (If in opposition, proceed to sections 3 and 4 below)								
2.	List all individuals or businessubject of this rezoning pet 1.	ition:	have an	5. 6. 7. 8.	nip interest in t	Received July 15, 2025 RZ-24-0010 Planning & Zoning			
3.	Name of Government Official	Total Dollar Amount	Date of Contribu	ition		n and Description of Gift 250.00 or more			
4.	The undersigned acknowledges that this disclosure is made in accordance with the Official Code of Georgia, Section 36-67A-1 et. seq. Conflict of interest in zoning actions, and that the information set forth herein is true to the undersigned's best knowledge, information and belief. Name (print) The undersigned acknowledges that this disclosure is made in accordance with the Official Code of Georgia, Section 36-67A-1 et. seq. Conflict of interest in zoning actions, and that the information set forth herein is true to the undersigned's best knowledge, information and belief. Name (print)								
	Signature:								