



Application for a Zoning Ordinance Map Amendment

METROPOLITAN AREA
PLANNING COMMISSION
Jonesboro, Arkansas

Date Received: 08-17-11
Case Number: RZ 11-18

LOCATION:

Site Address: 903 STRAW FLOOR

Side of Street: _____ between Matthews and NETTLETON

Quarter: NE Section: 23 Township: 11N Range: 3E

Attach a survey plat and legal description of the property proposed for rezoning. A Registered Land Surveyor must prepare this plat.

SITE INFORMATION:

Existing Zoning: R-1 Proposed Zoning: I-1

Size of site (square feet and acres): 435600.00
10 AC Street frontage (feet): 530'

Existing Use of the Site: VACANT LOT

Character and adequacy of adjoining streets: Asphalt - good

Does public water serve the site? Yes

If not, how would water service be provided? NA

Does public sanitary sewer serve the site? NO

If not, how would sewer service be provided? Septic

Use of adjoining properties:

North VACANT mostly - with one or two RESIDENCE

South VACANT & CEMETERY

East Irada GREGG'S RESIDENCE & CEMETERY

West VACANT - Woods TO Hwy 63

Physical characteristics of the site: Rolling Hills VACANT & Woods

Characteristics of the neighborhood: SAME AS ABOVE

Applications will not be considered complete until all items have been supplied. Incomplete applications will not be placed on the Metropolitan Area Planning Commission agenda and will be returned to the applicant. The deadline for submittal of an application is the 17th of each month. The Planning staff must determine that the application is complete and adequate before it will be placed on the MAPC agenda.

REZONING INFORMATION:

The applicant is responsible for explaining and justifying the proposed rezoning. *Please prepare an attachment to this application answering each of the following questions in detail:*

- (1). How was the property zoned when the current owner purchased it?
- (2). What is the purpose of the proposed rezoning? Why is the rezoning necessary?
- (3). If rezoned, how would the property be developed and used?
- (4). What would be the density or intensity of development (e.g. number of residential units; square footage of commercial, institutional, or industrial buildings)?
- (5). Is the proposed rezoning consistent with the *Jonesboro Comprehensive Plan* and the *Future Land Use Plan*?
- (6). How would the proposed rezoning be the public interest and benefit the community?
- (7). How would the proposed rezoning be compatible with the zoning, uses, and character of the surrounding area?
- (8). Are there substantial reasons why the property cannot be used in accordance with existing zoning?
- (9). How would the proposed rezoning affect nearby property including impact on property value, traffic, drainage, visual appearance, odor, noise, light, vibration, hours of use or operation and any restriction to the normal and customary use of the affected property.
- (10). How long has the property remained vacant?
- (11). What impact would the proposed rezoning and resulting development have on utilities, streets, drainage, parks, open space, fire, police, and emergency medical services?
- (12). If the rezoning is approved, when would development or redevelopment begin?
- (13). How do neighbors feel about the proposed rezoning? Please attach minutes of the neighborhood meeting held to discuss the proposed rezoning or notes from individual discussions. *If the proposal has not been discussed with neighbors, please attach a statement explaining the reason. Failure to consult with neighbors may result in delay in hearing the application.*
- (14). If this application is for a Limited Use Overlay (LUO), the applicant must specify all uses desired to be permitted.

OWNERSHIP INFORMATION:

All parties to this application understand that the burden of proof in justifying and demonstrating the need for the proposed rezoning rests with the applicant named below.

Owner of Record:

I certify that I am the owner of the property that is the subject of this rezoning application and that I represent all owners, including spouses, of the property to be rezoned. I further certify that all information in this application is true and correct to the best of my knowledge.

Name: Linda Gregg
 Address: 910 Strawflower Drive
 City, State: Jonesboro, Ar ZIP 72401
 Telephone: 870 - 919 - 5827
 Facsimile: _____
 Signature: Linda Gregg

Applicant:

If you are not the Owner of Record, please describe your relationship to the rezoning proposal:

 Name: _____
 Address: _____
 City, State: _____ ZIP _____
 Telephone: _____
 Facsimile: _____
 Signature: _____

Deed: *Please attach a copy of the deed for the subject property.*

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- ① R-1
- ② SIZE of 10 AC IS PENDING ON REZONING
- ③ work shop - construction - Equipment storage
- ④ one commercial ~~lot~~ Shop for working purpose
- ⑤
- ⑥ Bring business TO Area

- ⑦ most ALL surrounding Property IS VACANT or Cemetery
- ⑧ Yes - going TO be use AS Shop building
- ⑨ Value - None, (traffin - min.) drainage (NO effect)
Visual - (could improve) Hrs of operation 8 Hrs
- ⑩ ALWAYS been VACANT.
- ⑪ NONE
- ⑫ ~~Not Known~~ Not Known
- ⑬ Not Known
- ⑭ NO.