

U.S. Postal Service™  
**CERTIFIED MAIL® RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

Jonesboro, AR 72404

OFFICIAL USE

Certified Mail Fee

\$

Extra Services & Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy)

\$

☐ Return Receipt (electronic)

\$

☐ Certified Mail Restricted Delivery

\$

☐ Adult Signature Required

\$

☐ Adult Signature Restricted Delivery

\$

Postage

\$0.55

\$

Total Postage and Fees

\$12.40

\$

Sent To

James Dunivan, Superintendent

Street and Apt. No., or PO Box No.

3300 One Place

City, State, ZIP+4®

Jonesboro, AR 72404

0405  
11

ST 72401

Postmark  
Here

AUG 10 2020

08/10/2020

USP

7019 2640 0002 1000 049T 6T02

9066 3992 2666 9906



7019 1640 0001 1000 049T 6T02

# U.S. Postal Service<sup>TM</sup> CERTIFIED MAIL<sup>®</sup> RECEIPT

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Jonesboro, AR 72404

OFFICIAL USE

Certified Mail Fee \$3.55

\$

Extra Services & Fees (check box, add fee as appropriate)

- |  |    |        |
|--|----|--------|
| <input type="checkbox"/> Return Receipt (hardcopy)           | \$ | \$0.00 |
| <input type="checkbox"/> Return Receipt (electronic)         | \$ | \$0.00 |
| <input type="checkbox"/> Certified Mail Restricted Delivery  | \$ | \$0.00 |
| <input type="checkbox"/> Adult Signature Required            | \$ | \$0.00 |
| <input type="checkbox"/> Adult Signature Restricted Delivery | \$ | \$0.00 |

Postage \$0.55

\$

Total Postage and Fees \$4.10

\$

Sent To

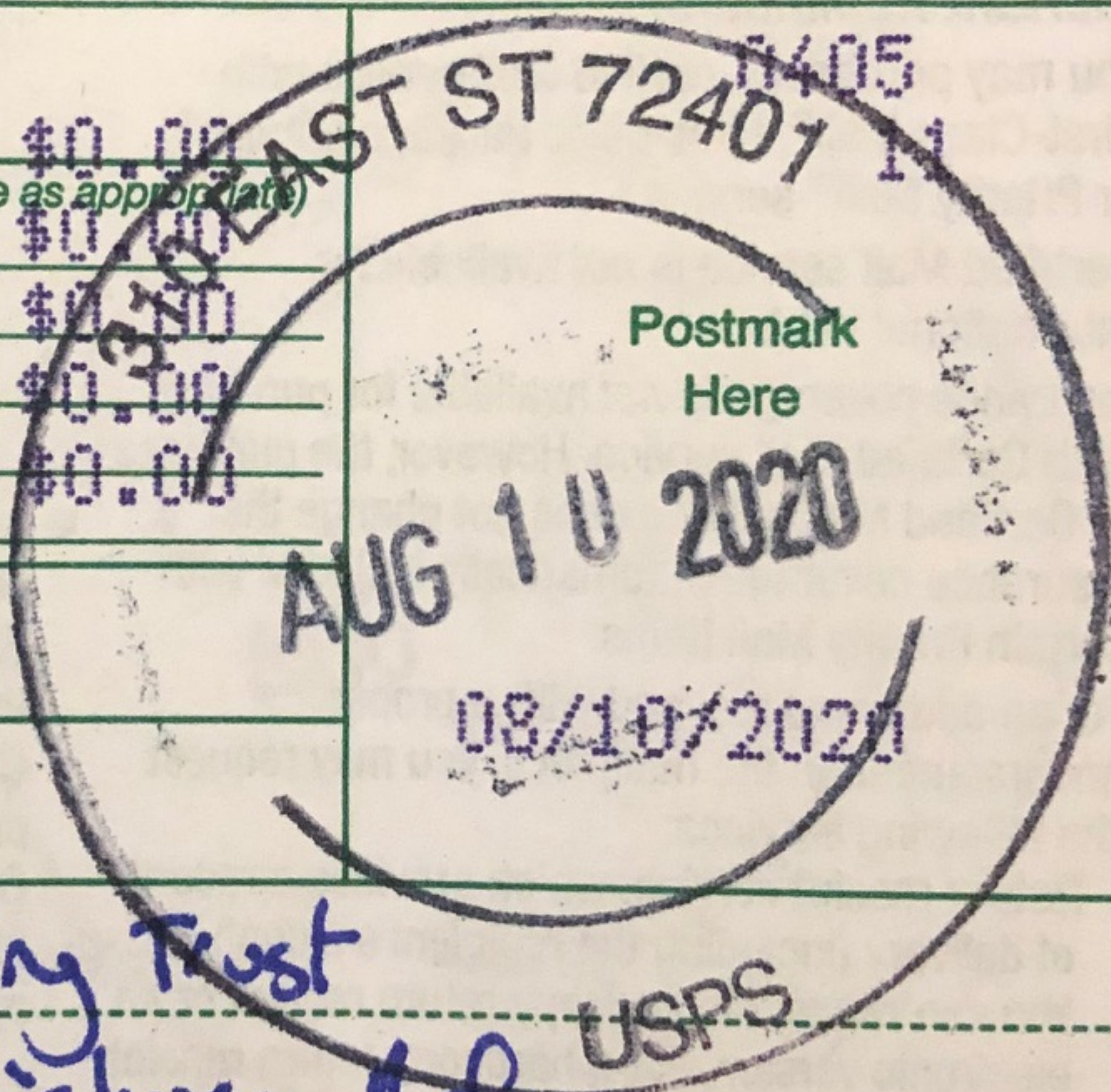
Crain Living Trust

Street and Apt. No., or PO Box No.

5230 Harrisburg Rd

City, State, ZIP+4<sup>®</sup>

Jonesboro, AR 72404





7019 1640 0001 2663 9920

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Certified Mail Fee \$3.55

\$

Extra Services & Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy)

\$

☐ Return Receipt (electronic)

\$

☐ Certified Mail Restricted Delivery

\$

☐ Adult Signature Required

\$

☐ Adult Signature Restricted Delivery

\$

Postage

\$0.55

\$

Total Postage and Fees

\$4.10

\$

Sent To

Ramona Repton

Street and Apt. No., or PO Box No.

5213 Harrisburg Rd

City, State, ZIP+4®

Jonesboro, AR 72404

0405

11

ST 72401

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08/10/2020

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Jonesboro, AR 72404

Certified Mail Fee \$3.55

\$

**Extra Services & Fees** (check box, add fee as appropriate)

☐ Return Receipt (hardcopy)

\$

☐ Return Receipt (electronic)

\$

☐ Certified Mail Restricted Delivery

\$

☐ Adult Signature Required

\$

☐ Adult Signature Restricted Delivery \$

\$

Postage

\$0.55

\$

Total Postage and Fees

**Figure 1**

\$

Sent To

Betty Clayton

Street and Apt. No., or PO Box No.

St. No., or PO Box No.  
5215 Harrisburg Ref

City, State, ZIP+4®

Jonesboro, AZ 72404

PS Form 3800, April 2015 PSN 7530-02-000-9047

**See Reverse for Instructions**

2019 1640 0001 1000 049T 6T02 2E66 E992 2663 9937



7019 1640 0001 1000 049T 6102 4466 3992 2663 9944

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JONESBORO, AR 72404

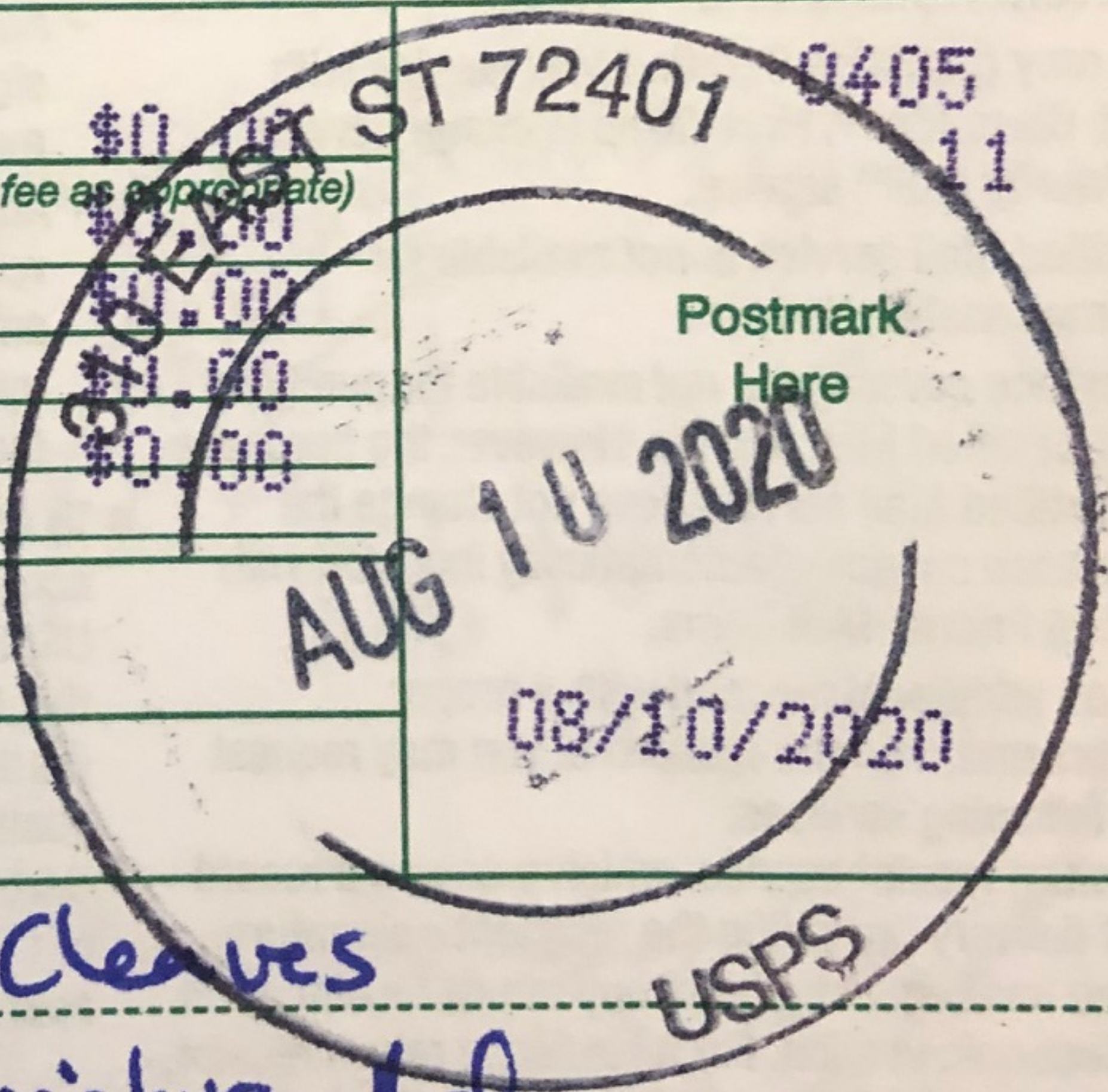
OFFICIAL USE

Certified Mail Fee \$3.55

\$	
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

Postage \$0.55

Total Postage and Fees \$4.10



Sent To John R. Cleaves

Street and Apt. No., or PO Box No. 5219 Harrisburg Rd

City, State, ZIP+4® Jonesboro, AR 72404



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Jonesboro, AR 72404

esboro, AR 72404

Certified Mail Fee **\$3.55**

\$

**Extra Services & Fees** (check box, add fee as appropriate)

☐ Return Receipt (hardcopy)

\$

☐ Return Receipt (electronic)

\$

☐ Certified Mail Restricted Delivery

\$

☐ Adult Signature Required

\$

☐ Adult Signature Restricted Delivery \$

\$

Postage \$0.55

\$

**Total Postage and Fees** \$4.10

\$

Sent To

Street and Apt. No., or PO Box No.

City, State, ZIP+4®



8966 3992 0000 0497 6102

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Jonesboro, AR 72403

OFFICIAL USE

Certified Mail Fee \$3.55

Extra Services & Fees (check box, add fee as appropriate)

- ☐ Return Receipt (hardcopy) \$
- ☐ Return Receipt (electronic) \$
- ☐ Certified Mail Restricted Delivery \$
- ☐ Adult Signature Required \$
- ☐ Adult Signature Restricted Delivery \$

Postage \$0.55

Total Postage and Fees \$4.10

Postmark  
Here

AUG 10 2020

08/10/2020

Sent To Snake Henry Land Company, LLC  
Street and Apt. No., or PO Box No. P.O. Box 16837  
City, State, ZIP+4<sup>®</sup> Jonesboro, AR 72403-6713



7019 1640 0001 2663 9975

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Jonesboro, AR 72404

OFFICIAL USE

Certified Mail Fee \$3.55

\$

Extra Services & Fees (check box, add fee as appropriate)

- |  |    |        |
|--|----|--------|
| <input type="checkbox"/> Return Receipt (hardcopy)           | \$ | \$0.00 |
| <input type="checkbox"/> Return Receipt (electronic)         | \$ | \$0.00 |
| <input type="checkbox"/> Certified Mail Restricted Delivery  | \$ | \$0.00 |
| <input type="checkbox"/> Adult Signature Required            | \$ | \$0.00 |
| <input type="checkbox"/> Adult Signature Restricted Delivery | \$ | \$0.00 |

Postage \$0.55

\$

Total Postage and Fees \$4.10

\$

Sent To

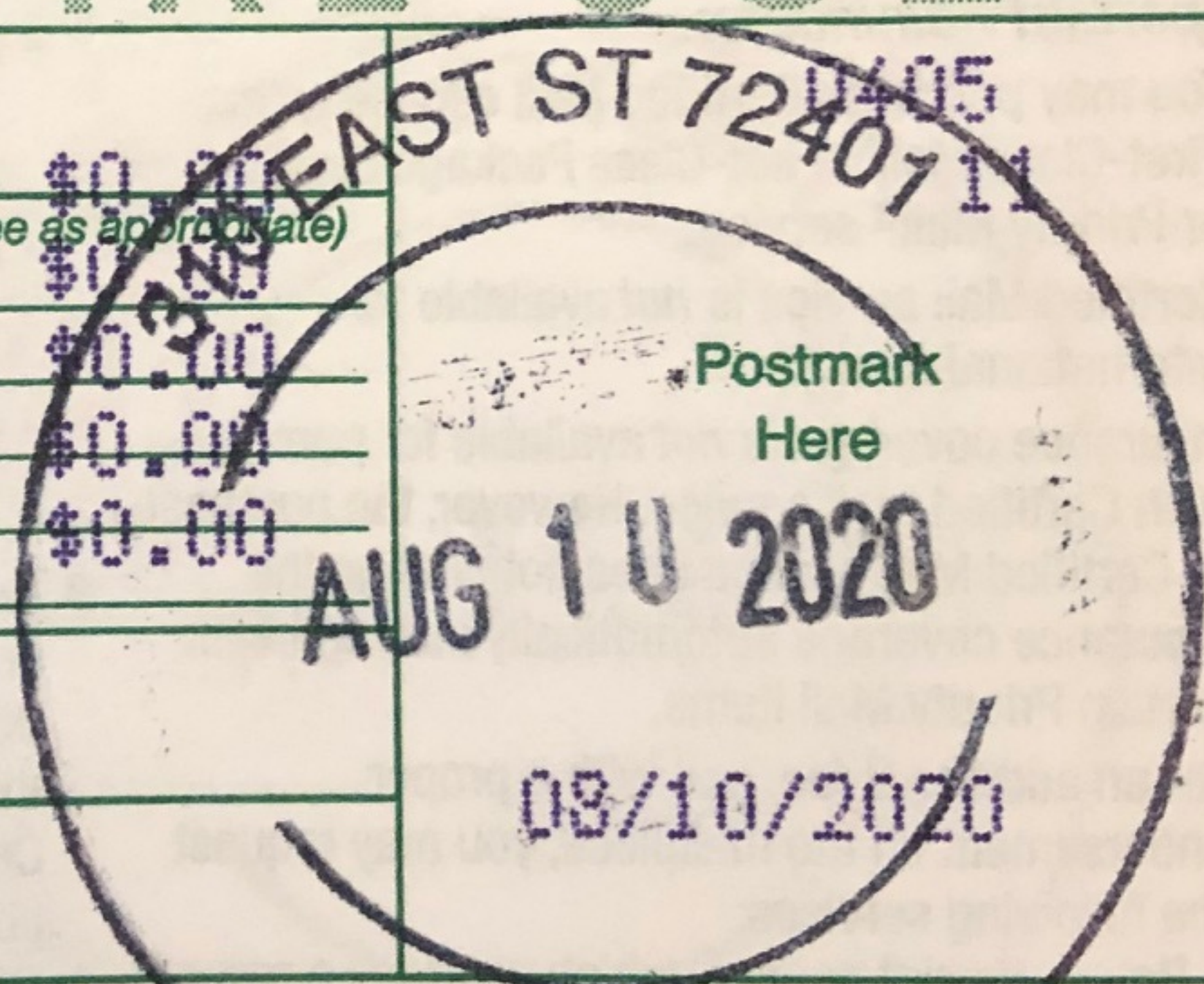
Estate of Shirley Markers

Street and Apt. No., or PO Box No.

5301 Harrisburg Rd

City, State, ZIP+4®

Jonesboro, AR 72404





7019 2280 0002 1043 8926

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Jonesboro, AR 72404

## OFFICIAL USE

Certified Mail Fee \$3.55

Extra Services & Fees (check box, add fee as appropriate)

- |  |    |        |
|--|----|--------|
| <input type="checkbox"/> Return Receipt (hardcopy)           | \$ | \$0.00 |
| <input type="checkbox"/> Return Receipt (electronic)         | \$ | \$0.00 |
| <input type="checkbox"/> Certified Mail Restricted Delivery  | \$ | \$0.00 |
| <input type="checkbox"/> Adult Signature Required            | \$ | \$0.00 |
| <input type="checkbox"/> Adult Signature Restricted Delivery | \$ | \$0.00 |

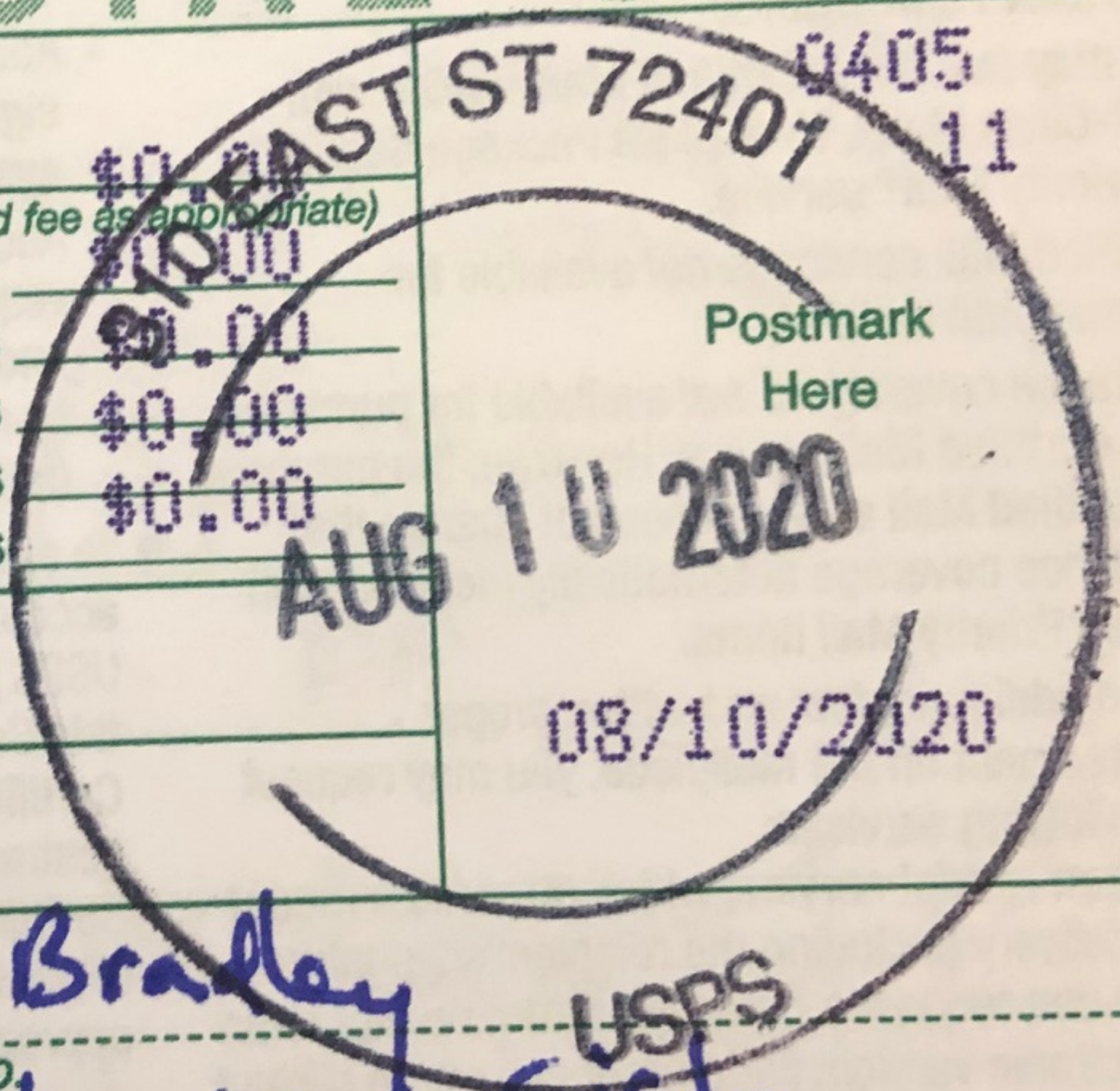
Postage \$0.55

Total Postage and Fees \$4.10

Sent To James W. Bradley

Street and Apt. No., or PO Box No. 1802 Countryview Circle

City, State, ZIP+4<sup>®</sup> Jonesboro, AR 72404





7019 2280 0000 2043 8933

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Jonesboro, AR 72404

OFFICIAL USE

Certified Mail Fee \$3.55

\$

Extra Services & Fees (check box, add fee as appropriate)

- |  |    |        |
|--|----|--------|
| <input type="checkbox"/> Return Receipt (hardcopy)           | \$ | \$0.00 |
| <input type="checkbox"/> Return Receipt (electronic)         | \$ | \$0.00 |
| <input type="checkbox"/> Certified Mail Restricted Delivery  | \$ | \$0.00 |
| <input type="checkbox"/> Adult Signature Required            | \$ | \$0.00 |
| <input type="checkbox"/> Adult Signature Restricted Delivery | \$ | \$0.00 |

Postage \$0.55

\$

Total Postage and Fees \$4.10

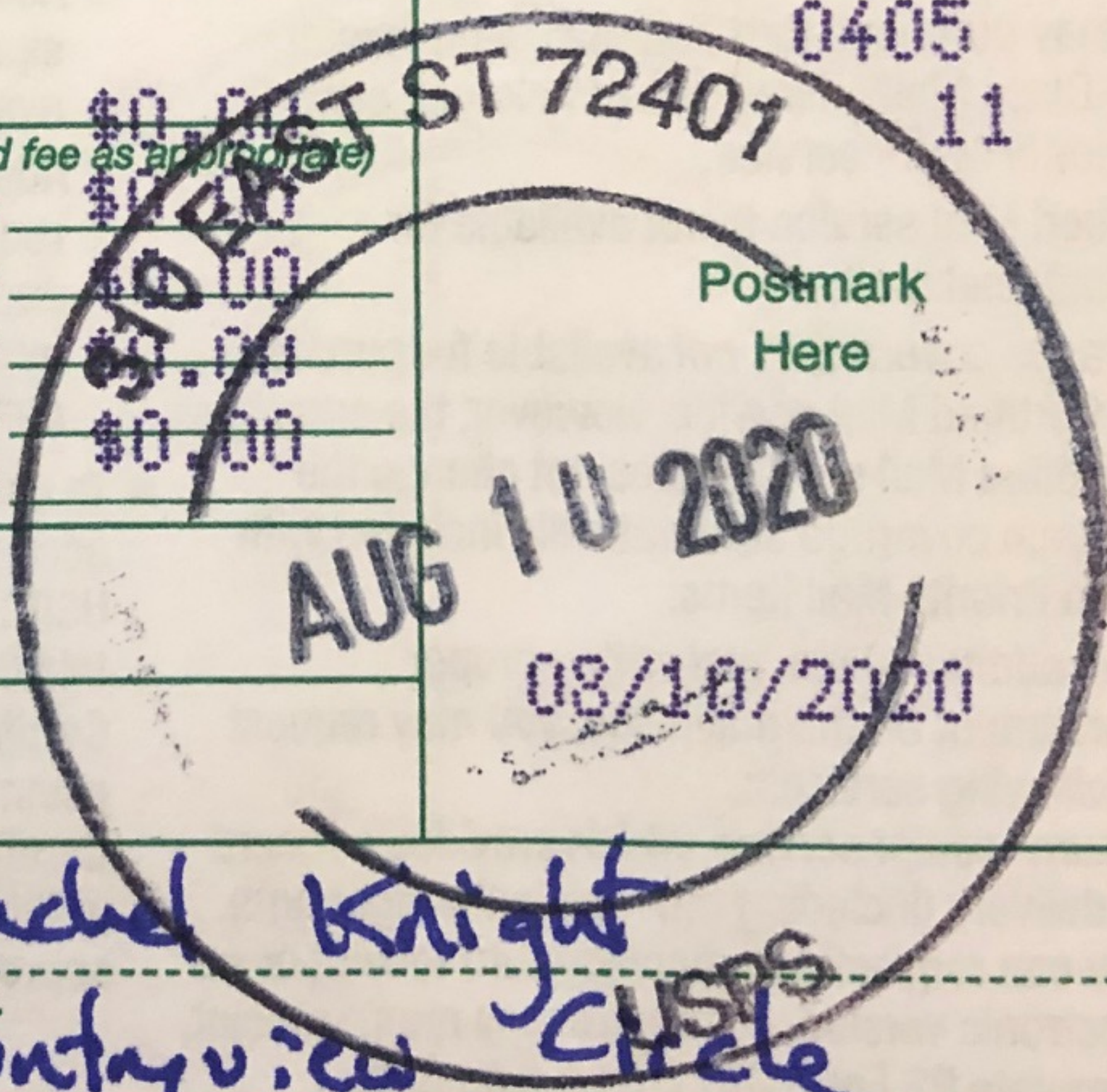
\$

Sent To

Street and Apt. No., or PO Box No.

City, State, ZIP+4®

Mark : Rachel Knight  
1806 Countryview Circle  
Jonesboro, AR 72404





7019 2280 0002 1043 8940

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Jonesboro, AR 72404

OFFICIAL USE

Certified Mail Fee \$3.55

\$

Extra Services & Fees (check box, add fee as appropriate)

- |  |    |      |
|--|----|------|
| <input type="checkbox"/> Return Receipt (hardcopy)           | \$ | 0.00 |
| <input type="checkbox"/> Return Receipt (electronic)         | \$ | 0.00 |
| <input type="checkbox"/> Certified Mail Restricted Delivery  | \$ | 0.00 |
| <input type="checkbox"/> Adult Signature Required            | \$ | 0.00 |
| <input type="checkbox"/> Adult Signature Restricted Delivery | \$ | 0.00 |

Postage \$0.55

\$

Total Postage and Fees \$4.10

\$

Sent To

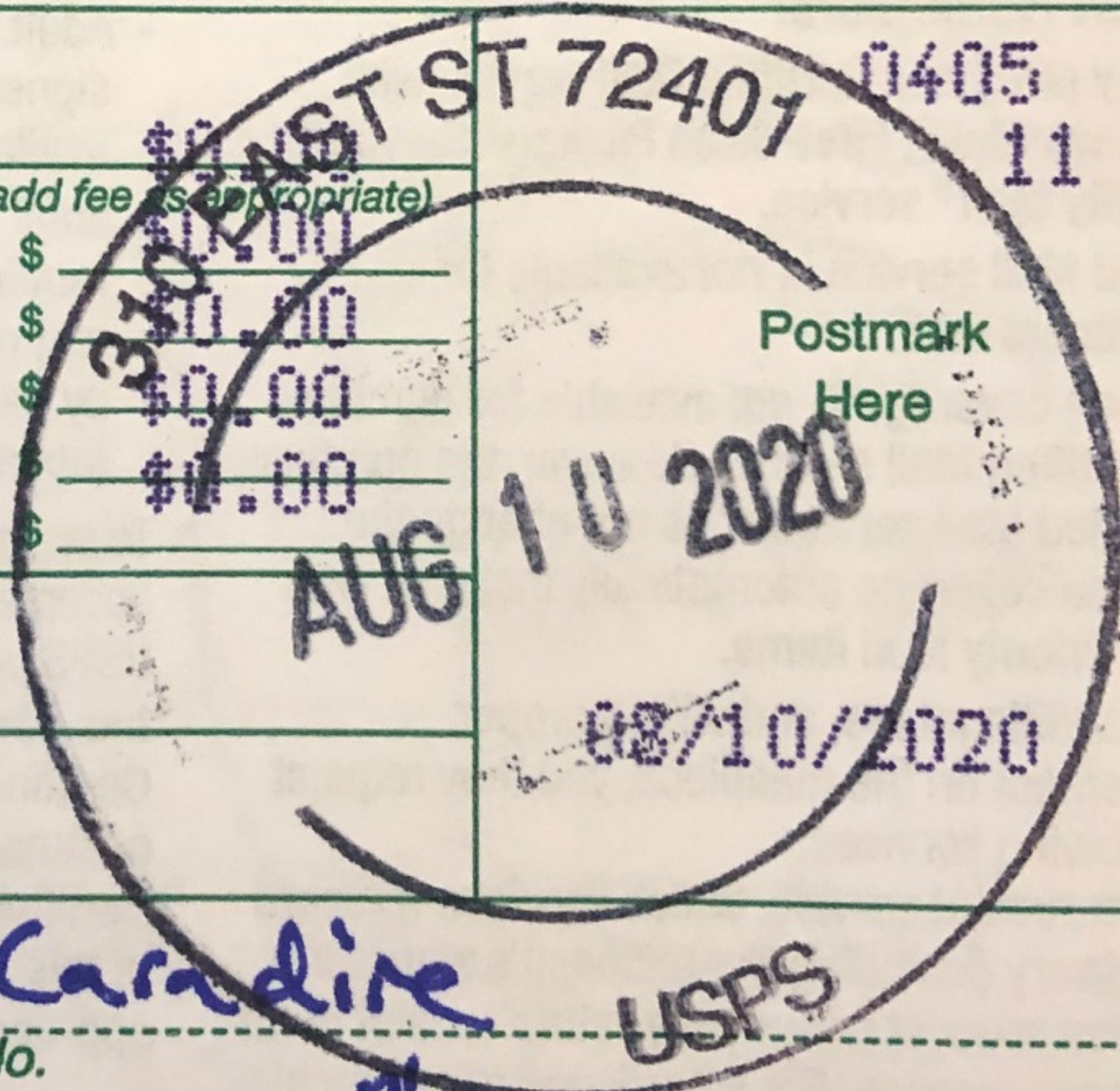
Isiah Caradine

Street and Apt. No., or PO Box No.

5113 Cayman Place

City, State, ZIP+4®

Jonesboro, AR 72404





7019 2280 0002 1043 8957

# U.S. Postal Service™ CERTIFIED MAIL® RECEIPT

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Fisher, AR 72429

OFFICIAL USE

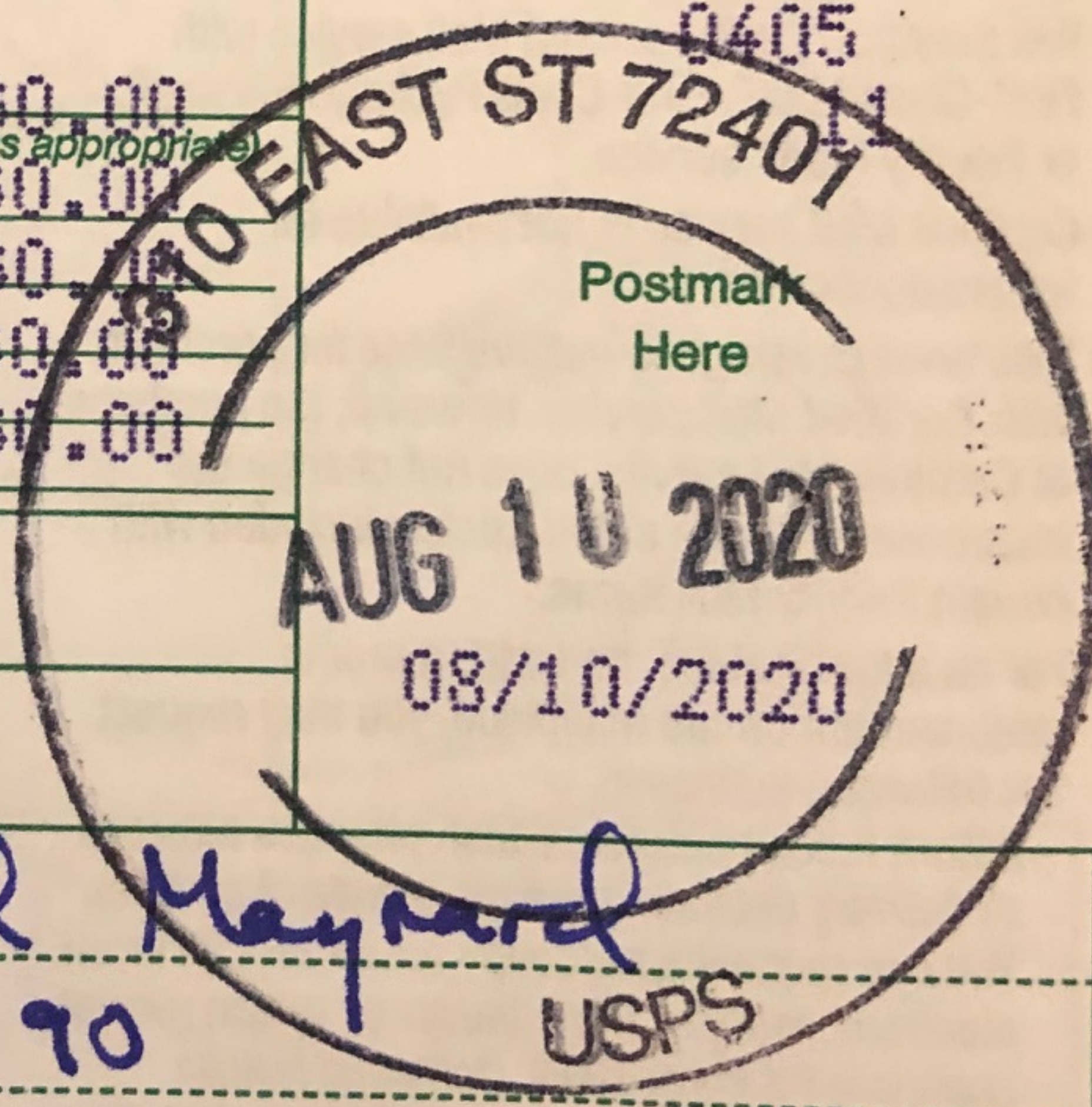
Certified Mail Fee	\$3.55
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$0.00
<input type="checkbox"/> Return Receipt (electronic)	\$0.00
<input type="checkbox"/> Certified Mail Restricted Delivery	\$0.00
<input type="checkbox"/> Adult Signature Required	\$0.00
<input type="checkbox"/> Adult Signature Restricted Delivery	\$0.00

Postage	\$0.55
Total Postage and Fees	\$4.10

Sent To **Steven Floyd Maynard**

Street and Apt. No., or PO Box No. **P.O. Box 190**

City, State, ZIP+4® **Fisher, AR 72429**





4968 8964  
 2043 2002 0000 0822 6102

# U.S. Postal Service™ CERTIFIED MAIL® RECEIPT Domestic Mail Only

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Jonesboro, AR 72404

OFFICIAL USE

Certified Mail Fee

\$3.55

\$

Extra Services & Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy)

\$

\$0.00

☐ Return Receipt (electronic)

\$

\$0.00

☐ Certified Mail Restricted Delivery

\$

\$0.00

☐ Adult Signature Required

\$

\$0.00

☐ Adult Signature Restricted Delivery

\$

\$0.00

Postage

\$0.55

\$

Total Postage and Fees

\$4.10

\$

Sent To

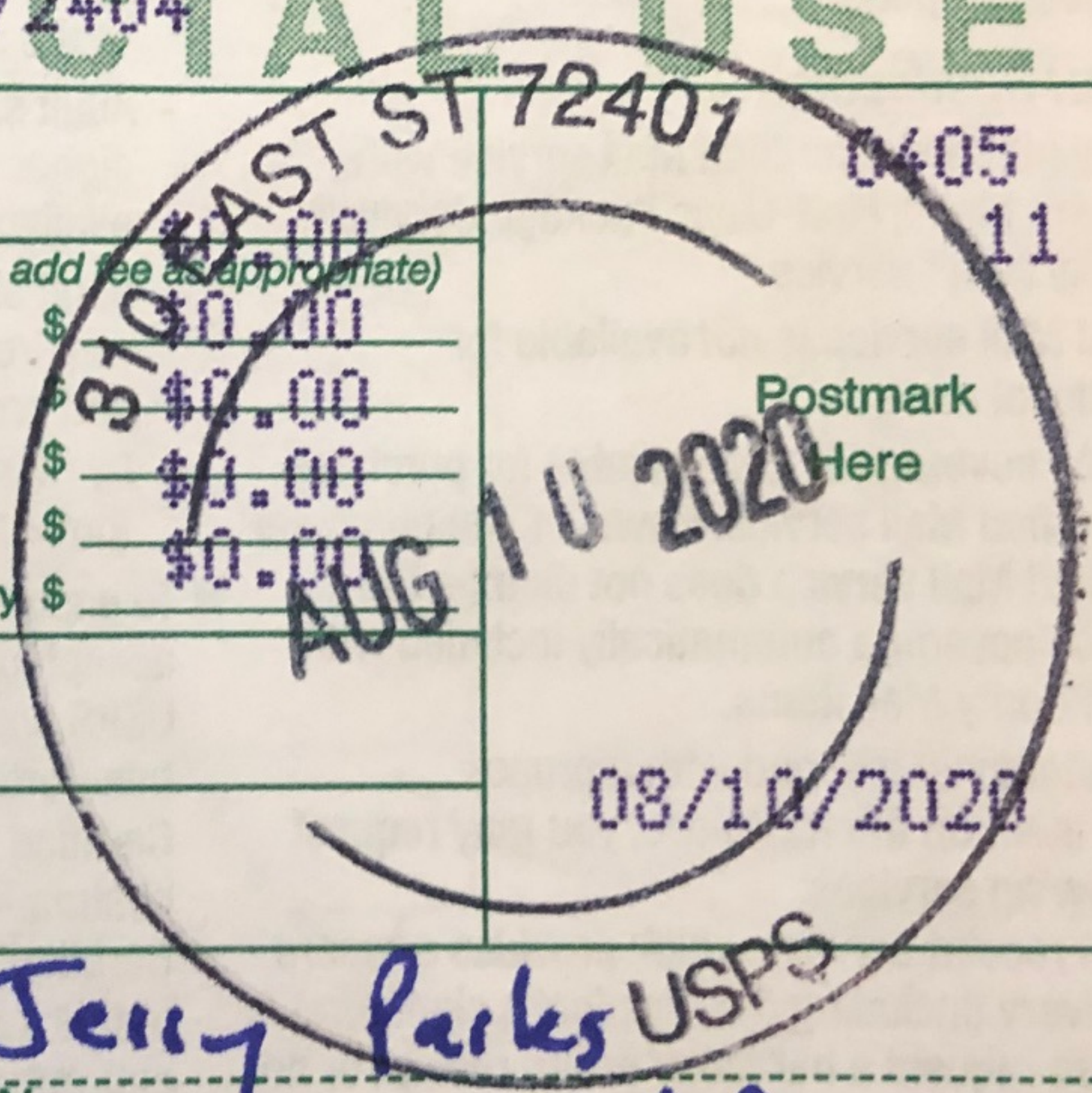
Lloyd & Jerry Parker USPS

Street and Apt. No., or PO Box No.

5116 S. Canaway Rd

City, State, ZIP+4®

Jonesboro, AR 72404



Postmark  
Here

08/10/2020



7019 2280 0002 1043 8971

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OFFICIAL USE

Certified Mail Fee \$3.55

\$

Extra Services & Fees (check box, add fee as appropriate)

- |  |    |        |
|--|----|--------|
| <input type="checkbox"/> Return Receipt (hardcopy)           | \$ | \$0.00 |
| <input type="checkbox"/> Return Receipt (electronic)         | \$ | \$0.00 |
| <input type="checkbox"/> Certified Mail Restricted Delivery  | \$ | \$0.00 |
| <input type="checkbox"/> Adult Signature Required            | \$ | \$0.00 |
| <input type="checkbox"/> Adult Signature Restricted Delivery | \$ | \$0.00 |

Postage \$0.55

\$

Total Postage and Fees \$4.10

\$

Sent To

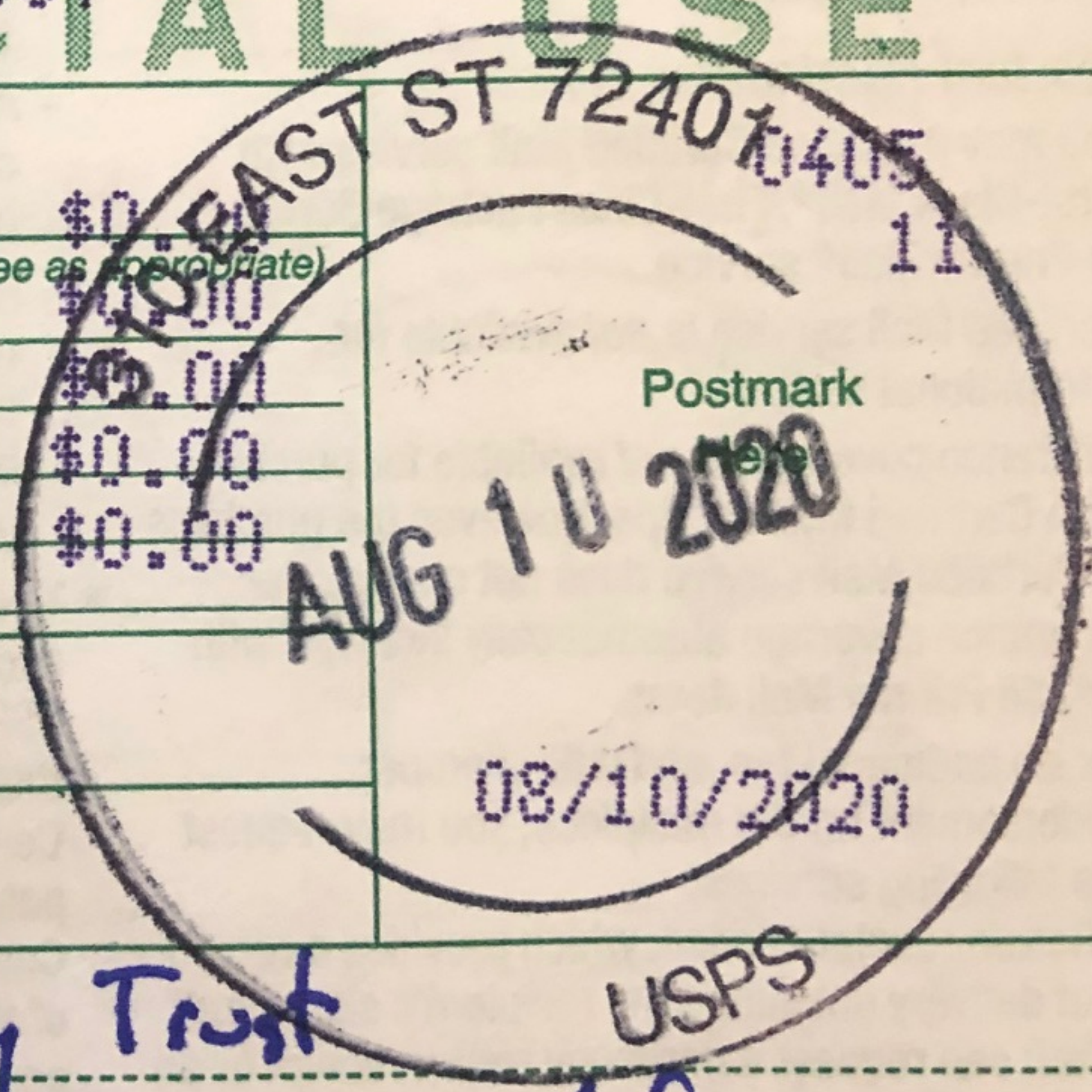
Merle Fry Trust

Street and Apt. No., or PO Box No.

5120 S. Caraway Rd

City, State, ZIP+4<sup>®</sup>

Jonesboro, AR 72404





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mesboro, AR 72404

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**Extra Services & Fees** (check box, add fee as appropriate)

☐ Return Receipt (hardcopy)

\$

☐ Return Receipt (electronic)

\$

☐ Certified Mail Restricted Delivery

\$

☐ Adult Signature Required

\$

☐ Adult Signature Restricted Delivery \$

\$

**Postage**

0.55

\$

**Total Postage and Fees**

94.10

\$

**Sent To**

Street and Apt. No., or PO Box No.

City, State, ZIP+4®

PS Form 3800, April 2015 PSN 7530-02-000-9047

**See Reverse for Instructions**

ST ST 72401

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Jonesboro, AR 72404

OFFICIAL USE

Certified Mail Fee

\$3.55

\$

Extra Services & Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy)

\$0.00

☐ Return Receipt (electronic)

\$0.00

☐ Certified Mail Restricted Delivery

\$0.00

☐ Adult Signature Required

\$0.00

☐ Adult Signature Restricted Delivery

\$0.00

Postage

\$0.55

\$

Total Postage and Fees

\$4.10

\$

Sent To

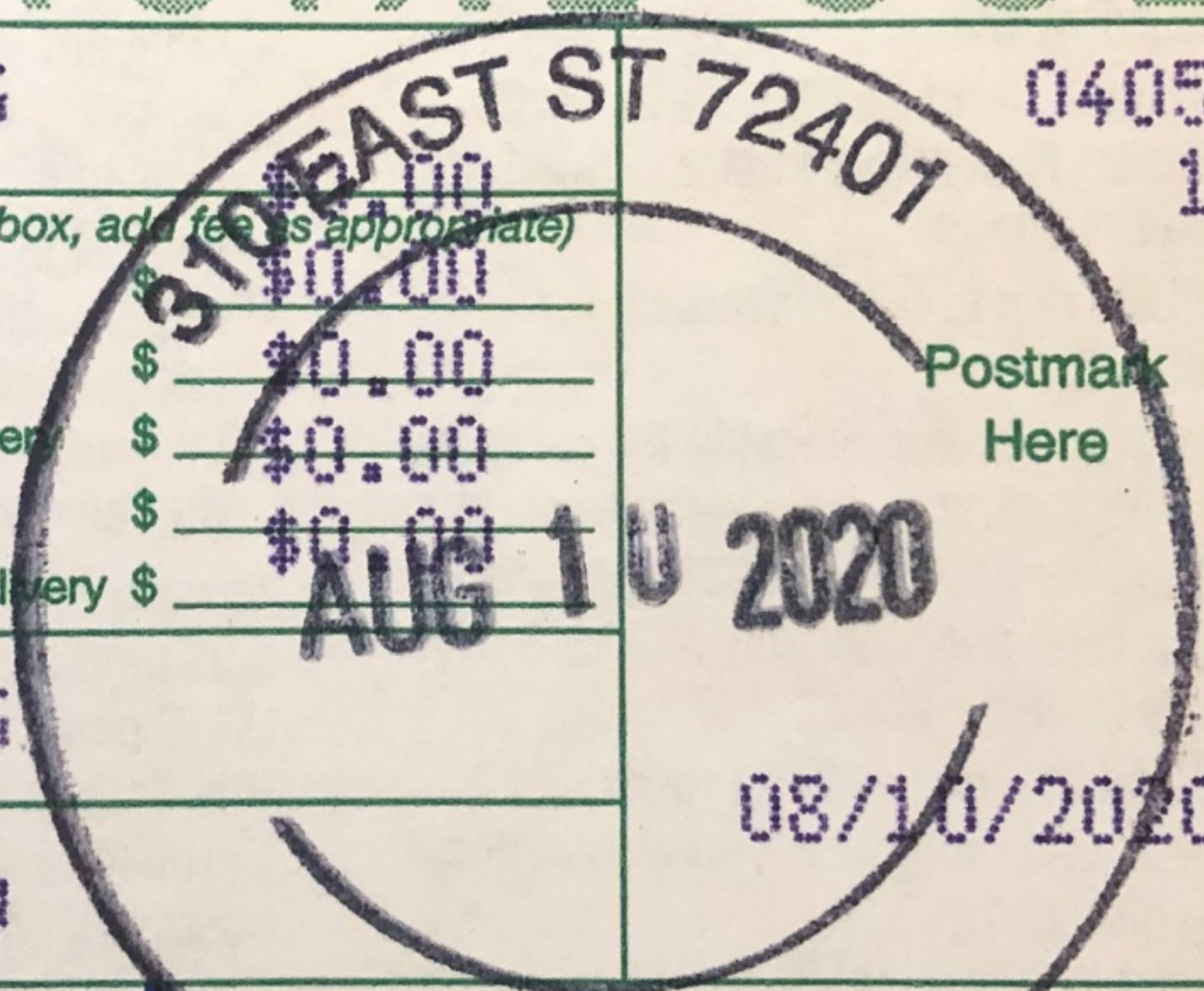
Michelle : James Bradley

Street and Apt. No., or PO Box No.

1802 Countryview Circle

City, State, ZIP+4<sup>®</sup>

Jonesboro, AR 72404



7019 2280 0002 1043 8995  
5668 E40T 2000 0822 6T02





**CITY OF JONESBORO  
MAPC PROPERTY OWNER NOTIFICATION**

The Metropolitan Area Planning Commission will hold a public hearing at the Municipal Building, 300 S. Church, Jonesboro, Arkansas, on:

**TUESDAY, AUGUST 25, 2020 AT 5:30 P.M.**

On the agenda for this meeting is a request to the Commission to approve a Zoning Request **on property within 200' of your property**. You have the opportunity to attend this meeting to voice your approval or disapproval if you wish. If you have information that you feel should be taken into consideration before a decision is rendered, you are encouraged to submit such information to the Commission. If the Commission renders a decision that you feel is unfair or unjust, you have the right to appeal the decision to City Council.

REQUEST BY: BLUE CLOUD DEVELOPMENT, LLC    DATE: AUGUST 25, 2020 @ 5:30 P.M.

DESCRIPTION OF REQUESTED USE: BLUE CLOUD DEVELOPMENT, LLC IS REQUESTING, ON BEHALF OF THE CURRENT PROPERTY OWNERS, TO REZONE THE PROPERTY FROM R-1 SINGLE FAMILY TO PD-RS SINGLE FAMILY.

LOCATION OF REQUESTED USE: APPROXIMATELY 3.32 ACRES LOCATED AT THE NORTHWEST CORNER OF THE INTERSECTION OF CARAWAY ROAD AND HARRISBURG ROAD.

In affixing my signature below, I am acknowledging my understanding of this request for a Zoning. I further understand that my signature only indicates my receipt of notification of the request for a conditional use and does not imply an approval by me or the proposed variance or appeal, unless so written by me to the Commission.

\_\_\_\_\_  
Printed Name of Property Owner within 200'

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Address

If you would like to obtain additional information, or voice an opinion regarding this request, you may do so by contacting the Planning Department, at 300 S. Church, or by calling 870-932-0406, between the hours of 8:00 a.m. and 5:00 p.m., Monday through Friday.