



# Application for a Zoning Ordinance Map Amendment

METROPOLITAN AREA  
PLANNING COMMISSION  
Jonesboro, Arkansas

Date Received: 10/10/18  
Case Number: 2218-26

**LOCATION:**

Site Address: 124 N. Fisher

Side of Street: Left between Chaiky St. and Aggie Rd.

Quarter: \_\_\_\_\_ Section: \_\_\_\_\_ Township: \_\_\_\_\_ Range: \_\_\_\_\_

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: I-1 Proposed Zoning: RM-8 Multi-Family duplex (residential)

Size of site (square feet and acres): 12,350.00<sup>sq</sup> ft / 0.28 Acres Street frontage (feet): 83 ft

Existing Use of the Site: Vacant Land

Character and adequacy of adjoining streets: \_\_\_\_\_

Does public water serve the site? yes

If not, how would water service be provided? \_\_\_\_\_

Does public sanitary sewer serve the site? yes

If not, how would sewer service be provided? \_\_\_\_\_

Use of adjoining properties:

North Letters send  
South \_\_\_\_\_  
East \_\_\_\_\_  
West \_\_\_\_\_

Physical characteristics of the site: nice level vacant land.

Characteristics of the neighborhood: com single family and multi-family area with well known neighbors

*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 17<sup>th</sup> 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: Martha A. Fernandez  
 Address: 124 W. Fisher St.  
 City, State: Jonesboro, AR ZIP 72401  
 Telephone: 870-819-1376  
 Facsimile: \_\_\_\_\_  
 \* Signature: Martha Fernandez

**Applicant:**

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

Angel Fernandez / owner of record  
Son  
 Name: Angel Fernandez  
 Address: 314 W. Allis St.  
 City, State: Jonesboro, AR ZIP 72401  
 Telephone: 870-819-1376  
 Facsimile: \_\_\_\_\_  
 Signature: Angel Fernandez

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

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