



Application for a Zoning Ordinance Map Amendment

METROPOLITAN AREA
PLANNING COMMISSION
Jonesboro, Arkansas

Meeting Date: _____

Date Received: 5/2/21

Meeting Deadline: _____

Case Number: R2, 21-08

LOCATION:

Site Address: 3003 KINGSBURN DR. JONESBORO AR 72401

Side of Street: SOUTH between RED WOLF BLV and BRAZOS ST.

Quarter: NW 1/4 SE 1/4 Section: 21 Township: 14 NORTH Range: 4 EAST

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-2 Proposed Zoning: C-3

Size of site (square feet and acres): 0.23 AC 9986.4 sq ft Street frontage (feet): 85'

Existing Use of the Site: RESIDENTIAL RENTAL

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 RESIDENTIAL

South CHURCH PARKING LOT

East RESIDENTIAL (RENTAL)

West RED WOLF BLVD. OTHER SIDE ALL C-3

Physical characteristics of the site: CITY LOT WITH OLDER HOUSE

Characteristics of the neighborhood: OLDER NEIGHBORHOOD

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 on the public meeting schedule. 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? - R-2
- (2). What is the purpose of the proposed rezoning? Why is the rezoning necessary? HAIR/NAIL SALON
- (3). If rezoned, how would the property be developed and used? SITE PLAN-NEW BUILDING
- (4). What would be the density or intensity of development (e.g. number of residential units; square footage of commercial, institutional, or industrial buildings)? 1 BUILDING APPROX 1900 SQ FT
- (5). Is the proposed rezoning consistent with the Jonesboro Comprehensive Plan and the Future Land Use Plan? YES
- (6). How would the proposed rezoning be the public interest and benefit the community? NEW BUSINESS
- (7). How would the proposed rezoning be compatible with the zoning, uses, and character of the surrounding area?
THERE ARE SEVERAL C-3 IN 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.
SHOULD IMPROVE
- (10). How long has the property remained vacant? NOT 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? NONE
- (12). If the rezoning is approved, when would development or redevelopment begin? AS SOON AS APPROVED
- (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. NO

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.

Applicant:

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

Name: DUSTIN TRAN
 Address: 1005 BROWNSTONE DR
 City, State: JONESBORO AR ZIP 72404
 Telephone: 870 253 6115
 Facsimile: _____
 Signature: [Signature]

Name: DUYEN TRAN
 Address: 1005 BROWNSTONE DR
 City, State: JONESBORO AR ZIP 72404
 Telephone: 870 219 3168
 Facsimile: FATHER
 Signature: [Signature]

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

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