

CITY OF DRIPPING SPRINGS

PHYSICAL: 511 Mercer Street • MAILING: PO Box 384

Dripping Springs, TX 78620

• 512.858.4725 • www.cityofdrippingsprings.com

ZONING/PDD AMENDMENT APPLICATION

Case Number (staff use only): _______

CONTACT INFORMATION

PROPERTY OWNER NAME Charles W. & Sherry E Haydon / Robert L. & Martha Haydon

STREET ADDRESS 601 Gatlin Creek Road

CITY_Dripping Springs____STATE_Texas____ZIP CODE_

PHONE (512) 924-7728 EMAIL 601charliesherry@gmail.com

STATE Texas

APPLICANT NAME JON Thompson

COMPANY J Thompson Professional Consulting, LLC

STREET ADDRESS PO Box 172

CITY Dripping Springs

ZIP CODE 78620

78620

PHONE (512) 568-2184 EMAIL ithompsonconsultingds@gmail.com

REASONS FOR AMENDMENT	
☐ TO CORRECT ANY ERROR IN THE REGULATION OR MAP	TO RECOGNIZE CHANGES IN TECHNOLOGY, STYLE OF LIVING, OR MANNER OF CONDUCTING BUSINESS
☐ TO RECOGNIZE CHANGED CONDITIONS OR CIRCUMSTANCES IN A PARTICULAR LOCALITY	TO MAKE CHANGES IN ORDER TO IMPLEMENT POLICIES REFLECTED WITHIN THE COMPREHENSIVE PLAN

<u>PRC</u>	OPERTY & ZONING INFORMATION	
PROPERTY OWNER NAME	Willie Mae Haydon Estate c/o Charles W. & Robert L. Haydon	
PROPERTY ADDRESS	No address	
CURRENT LEGAL DESCRIPTION	W.T. Chapman Fifth Addition, Lots 1, 2, 3, 4, 7, & 8 Block 1	
TAX ID#	R23586	
LOCATED IN		
CURRENT ZONING	SF4	
REQUESTED ZONING/AMENDMENT TO PDD	SF3	
REASON FOR REQUEST (Attach extra sheet if necessary)	Proposed zoning change is to reflect the proposed replat of the property into six residential lots.	
INFORMATION ABOUT PROPOSED USES (Attach extra sheet if necessary)	The proposed use is for residential single family detached residential town homes.	

COMPLIANCE WITH OUTDOOR LIGHTING ORDINANCE? *

(See attached agreement).

YES (REQUIRED)* I YES (VOLUNTARY)* NO*

* If proposed subdivision is in the City Limits, compliance with Lighting Ordinance is **mandatory**. If proposed subdivision is in the ETJ, compliance is **mandatory** when required by a Development Agreement or as a condition of an Alternative Standard/Special Exception/Variance/Waiver.

Voluntary compliance is <u>strongly</u> encouraged by those not required by above criteria (see Outdoor Lighting tab on the CODS webpage and online Lighting Ordinance under Code of Ordinances tab for more information).

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APPLICANT'S SIGNATURE

The undersigned, hereby confirms that he/she/it is the owner of the above described real property and further, that <u>Jon Thompson</u> is authorized to act as my agent and representative with respect to this Application and the City's zoning amendment process.

(As recorded in the Hays county Property Deed Records, vol, Fg) Cause #10-0113-)		
	Charlen Hazal Name	Q
	<u>Owner</u> Title	
STATE OF TEXAS	§ §	
COUNTY OF HAYS	ş	
This instrument was acknowledged before me on the 17 day of 300 ,		
20221 by Charline Haydon. Day Iwent Notary Public State of Texas		
My Commission Expires: 7-19-20-24		
Jon Thompson, J Tho Name of Applicant	ompson Professional Consulting, LLC	Comm. Expires 07-19-2021 Notary ID 124959964

ZONING AMENDMENT SUBMITTAL

		nd information (including all applicable above listed exhibits and fees) must be received by	
	52	ation and request to be considered complete. Incomplete submissions will not be accepted.	
By sign	ning below, I	acknowledge that I have read through and met the above requirements for a complete	
submit	tal: Jon 7	ThompsonJune 14, 2021Date	
Applicar	nt Signature	Date	
CHECKLIST			
STAFF	APPLICANT		
		Completed Application Form - including all required signatures and notarized	
		Application Fee-Zoning Amendment or PDD Amendment (refer to Fee Schedule)	Exempt
	a sugarant	PDF/Digital Copies of all submitted Documents	
	Ø	When submitting digital files, a cover sheet must be included outlining what digital contents are included.	
		Billing Contact Form	
		GIS Data	1
	Ø	Outdoor Lighting Ordinance Compliance Agreement - signed with attached photos/drawings (required if marked "Yes (Required)" on above Lighting Ordinance Section of application)	
	V	Legal Description	
		Concept Plan	
		Plans N/A	
		Maps	
		Architectural Elevation N/A	
		Explanation for request (attach extra sheets if necessary)	-
		Information about proposed uses (attach extra sheets if necessary)	
		Public Notice Sign (refer to Fee Schedule)	
		Proof of Ownership-Tax Certificate or Deed	
		Copy of Planned Development District (<i>if applicable</i>) N/A	
		Digital Copy of the Proposed Zoning or Planned Development District Amendment N/A	

Received on/by:

Date, initials



LIGHTING ORDINANCE COMPLIANCE AGREEMENT

Property Address: 102 South Bluff Street

Commercial

Residential

Applicant's Name (and Business Name, if Applicable):

Jim Polkinghorn

Applicant's Address: 365 Poco Rnach Road, Dripping Springs, Texas 78620

Applicant's Email: _____

VOLUNTARY COMPLIANCE with mitigation conditions:

MANDATORY COMPLIANCE: IF APPLYING FOR:

Conditional Use Permit	
Zoning Amendment Application	
Subdivision Approval	
Building Permit	

	Site Development Permit
	Sign Permit
	Alcoholic Beverage Permit
0	Food Establishment Permit
	On-Site Sewage Facility Permit

By applying for a Conditional Use Permit, Zoning Amendment Application, Subdivision Approval, or Building Permit for a major addition, all existing outdoor lighting shall be brought into conformance with the City of Dripping Spring's Lighting Ordinance (see Ch. 24, Sec 1, 24.06.005 in CODS Code of Ord.) before: final inspection, issuance of a certificate of occupancy, or final plot recordation.

Applicants receiving a permit for: Site Development, Sign Permit for externally or internallyilluminated outdoor sign, initial Alcoholic Beverage Permit, initial Food Establishment Permit, and On-Site Sewage Facility Permit shall have a maximum of 90 days from permit issuance to conform with the City of Dripping Spring's Lighting Ordinance (see Ch. 24, Sec 1, 24.06.005 in CODS Code of Ord.).

-If existing lighting is nonconforming, plans for bringing the lighting into conformance are required to be attached to this agreement.

-If existing lighting is already in conformity with the lighting ordinance, photos of all on-site lighting are required to be attached to this agreement for verification.

By signing below, I acknowledge that I have read and agreed to these terms and conditions and accept responsibility for conforming to the above stated ordinance specifications:

6/17/2021 Date

Received on/by:

Project Number:	-
Only filled out by staff	

Date, initials



BILLING CONTACT FORM

Project Name: Jon Thompson, J Thompson Professional Consulting, LLC		
Project Address: 102 South Bluff Street		
Project Applicant Name: Jon Thompson, J Thompson Professional Consulting, LLC		
Billing Contact Information		
Name: Jim Polkinghorn		
Mailing Address: 365 Poco Ranch Road		
Dripping Springs, T		
Email:	_Phone Number: (512) 431-0778	
Type of Project/Application (check all that apply):		
□ Alternative Standard	□ Special Exception	
□ Certificate of Appropriateness	Street Closure Permit	
Conditional Use Permit	□ Subdivision	
Development Agreement	U Waiver	
Exterior Design	□ Wastewater Service	
□ Landscape Plan	□ Variance	
□ Lighting Plan	Zoning	
□ Site Development Permit	□ Other	

Applicants are required to pay all associated costs associated with a project's application for a permit, plan, certificate, special exception, waiver, variance, alternative standard, or agreement, regardless of City approval. Associated costs may include, but are not limited to, public notices and outside professional services provided to the City by engineers, attorneys, surveyors, inspectors, landscape consultants, lighting consultants, architects, historic preservation consultants, and others, as required. Associated costs will be billed at cost plus 20% to cover the City's additional administrative costs. **Please see the online Master Fee Schedule for more details.** By signing below, I am acknowledging that the above listed party is financially accountable for the payment and responsibility of these fees.

Signature of Applicant