



City of Dripping Springs

PHYSICAL: 511 Mercer Street • MAILING: PO Box 384

Dripping Springs, TX 78620

512.858.4725 • cityofdrippingsprings.com

CONDITIONAL USE PERMIT APPLICATION

Case Number (staff use only): _____ - _____

NEW APPLICATION EXTENSION OF A PREVIOUSLY APPROVED CUP

CONTACT INFORMATION

PROPERTY OWNER NAME JMA Land LLC

STREET ADDRESS 4203 Spinnaker Cove

CITY Austin STATE Texas ZIP CODE 78731

PHONE 512-452-7789 EMAIL johnsmuhich@gmail.com

APPLICANT NAME Ken Leonard

COMPANY AAA Storage LLC

STREET ADDRESS 204 Arrezo Lane

CITY Georgetown STATE Texas ZIP CODE 78628

PHONE 254-466-7304 EMAIL kenneth.t.leonard@gmail.com

PROPERTY INFORMATION	
PROPERTY OWNER NAME	JMA Land LLC
PROPERTY ADDRESS	1300 E. US 290
CURRENT LEGAL DESCRIPTION	Description of 5.020 Acres of land out of Mallot survey No.299 in Hays County, Texas
TAX ID#	88-3528537
LOCATED IN	<input checked="" type="checkbox"/> CITY LIMITS <input type="checkbox"/> EXTRATERRITORIAL JURISDICTION
CURRENT ZONING	
PROPOSED USE	Storage Facility / Business Park
REASON FOR REQUEST <i>(Attach extra sheet if necessary)</i>	Completion of Work for phase 2 of the Storage Facility 4 additional building And the completion of the Business Park building.

COMPLIANCE WITH OUTDOOR LIGHTING ORDINANCE? *

(See attached agreement).

YES (REQUIRED)* 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 strongly 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).*

APPLICANT'S SIGNATURE

The undersigned, hereby confirms that he/she/it is the owner of the above described real property and further, that John Muhich 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. 2651, Pg. 479.)

John Muhich
Name

Owner
Title

STATE OF TEXAS §
 §
COUNTY OF HAYS §

This instrument was acknowledged before me on the 10 day of July,

2023 by [Signature]
Kenneth Leonard

[Signature]
Notary Public, State of Texas
KENNETH THOMAS LEONARD
Notary ID #126751077
My Commission Expires
December 12, 2024

My Commission Expires: _____
[Signature]
Kenneth T Leonard
Name of Applicant

CONDITIONAL USE PERMIT SUBMITTAL

All required items and information (including all applicable above listed exhibits and fees) must be received by the City for an application and request to be considered complete. Incomplete submissions will not be accepted. By signing below, I acknowledge that I have read through and met the above requirements for a complete submittal:

Ken Leonard
Applicant Signature

July 21 2023
Date

CHECKLIST

STAFF	APPLICANT	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Completed Application Form - including all required signatures and notarized
<input type="checkbox"/>	<input checked="" type="checkbox"/>	PDF/Digital Copies of all submitted Documents When submitting digital files, a cover sheet must be included outlining what digital contents are included.
<input type="checkbox"/>	<input type="checkbox"/>	Application Fee (<i>refer to Fee Schedule</i>)
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Billing Contact Form
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Outdoor Lighting Ordinance Compliance Agreement - signed with attached photos/drawings (<i>required if marked "Yes (Required)" on above Lighting Ordinance Section of application</i>)
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Legal Description
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Plans
<input type="checkbox"/>	<input type="checkbox"/>	Maps/Site Plan/Plat
<input type="checkbox"/>	<input type="checkbox"/>	Architectural Elevation (<i>if applicable</i>)
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Explanation for request (<i>attach extra sheets if necessary</i>)
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Public Notice Sign (<i>refer to Fee Schedule</i>)
		Proof of Ownership-Tax Certificate or Deed

Received on/by: _____

Project Number: _____
Only filled out by staff



DRIPPING SPRINGS
Texas

BILLING CONTACT FORM

Project Name: AAA Storage Dripping 290

Project Address: 1300 E US 290 Dripping Springs

Project Applicant Name: Ken Leonard

Billing Contact Information

Name: Ken Leonard

Mailing Address: 204 Arrezo Lane

Georgetown, Texas 78628

Email: kenneth.t.leonard@gmail.com Phone Number: 254-466-7304

Type of Project/Application (check all that apply):

- | | |
|--|--|
| <input type="checkbox"/> Alternative Standard | <input type="checkbox"/> Special Exception |
| <input type="checkbox"/> Certificate of Appropriateness | <input type="checkbox"/> Street Closure Permit |
| <input checked="" type="checkbox"/> Conditional Use Permit | <input type="checkbox"/> Subdivision |
| <input type="checkbox"/> Development Agreement | <input type="checkbox"/> Waiver |
| <input type="checkbox"/> Exterior Design | <input type="checkbox"/> Wastewater Service |
| <input type="checkbox"/> Landscape Plan | <input type="checkbox"/> Variance |
| <input type="checkbox"/> Lighting Plan | <input type="checkbox"/> Zoning |
| <input type="checkbox"/> Site Development Permit | <input type="checkbox"/> 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.

Ken Leonard

Signature of Applicant

July 6 2023

Date