



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 Glenn & Leigh Ann Pollard

STREET ADDRESS 2303 W Hwy 290

CITY Dripping Springs STATE Texas ZIP CODE 78620

PHONE (512) 845-6416 EMAIL pollardleigh@gmail.com

APPLICANT NAME Jon Thompson

COMPANY J Thompson Professional Consulting, LLC

STREET ADDRESS PO Box 172

CITY Dripping Springs STATE Texas ZIP CODE 78620

PHONE (512) 568-2184 EMAIL jthompsonconsultingds@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

PROPERTY & ZONING INFORMATION

PROPERTY OWNER NAME	Glenn & Leigh Ann Pollard
PROPERTY ADDRESS	2303 W Hwy 290, Dripping Springs, Texas 78620
CURRENT LEGAL DESCRIPTION	A0222 BENJAMIN F HANNA SURVEY, ACRES 5.602
TAX ID#	R15059
LOCATED IN	<input checked="" type="checkbox"/> CITY LIMITS <input type="checkbox"/> EXTRATERRITORIAL JURISDICTION
CURRENT ZONING	General Retail (GR)
REQUESTED ZONING/AMENDMENT TO PDD	Agricultural (AG)
REASON FOR REQUEST <i>(Attach extra sheet if necessary)</i>	The owners wish to construct an accessory dwelling unit for immediate family to occupy. AG zoning is the only zoning district in which this use is a Permitted right rather than a Conditional use. The zoning ordinance states for AG zoning, "Single-family uses on large lots (2 acre minimum) are also appropriate for this district." Since this tract exists as a 5.6 acre tract and has a primary use as a single family residential tract, the property fits this district's intended use.
INFORMATION ABOUT PROPOSED USES <i>(Attach extra sheet if necessary)</i>	The existing use is single family residential. In the near future the owners would like to build an accessory dwelling unit whose purpose is as a dwelling for immediate family (whose use is also single family residential).

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 Jon Thompson 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. _____, Pg. _____.) Instrument # **18021148**

Leigh Glenn Pollard 6L Pollard
Name

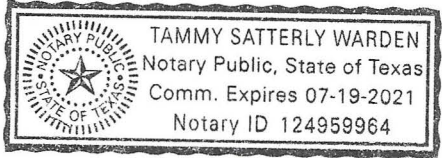
Home owner
Title

STATE OF TEXAS §
 §
COUNTY OF HAYS §

This instrument was acknowledged before me on the 17 day of September, 2020 by Leigh Glenn Pollard.

Tammy Satterly Warden
Notary Public, State of Texas

My Commission Expires: 7-19-2021



Jon Thompson, J Thompson Professional Consulting, LLC
Name of Applicant

ZONING AMENDMENT 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:

Jon Thompson
Applicant Signature

September 16, 2020
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"/>	Application Fee-Zoning Amendment or PDD Amendment (<i>refer to Fee Schedule</i>)
<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 checked="" type="checkbox"/>	Billing Contact Form
<input type="checkbox"/>	<input type="checkbox"/>	GIS Data Not available; property not platted.
<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 type="checkbox"/>	Concept Plan N/A
<input type="checkbox"/>	<input type="checkbox"/>	Plans N/A
<input type="checkbox"/>	<input type="checkbox"/>	Maps (A survey is all that would be available; an aerial photograph is also available)
<input type="checkbox"/>	<input type="checkbox"/>	Architectural Elevation N/A
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Explanation for request (<i>attach extra sheets if necessary</i>)
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Information about proposed uses (<i>attach extra sheets if necessary</i>)
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Public Notice Sign (<i>refer to Fee Schedule</i>)
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Proof of Ownership-Tax Certificate or Deed
<input type="checkbox"/>	<input type="checkbox"/>	Copy of Planned Development District (<i>if applicable</i>) N/A
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Digital Copy of the Proposed Zoning or Planned Development District Amendment

Received on/by:

Date, initials



LIGHTING ORDINANCE COMPLIANCE AGREEMENT

Property Address: 2303 W Hwy 290, Dripping Springs, Texas 78620

Commercial Residential

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

Glenn & Leigh Ann Pollard

Applicant's Address: 2305 W Hwy 290, Dripping Springs, Texas 78620

Applicant's Email: pollardleigh@gmail.com

VOLUNTARY COMPLIANCE with mitigation conditions:

MANDATORY COMPLIANCE:

IF APPLYING FOR:

- | | |
|--|---|
| <input type="checkbox"/> Conditional Use Permit | <input type="checkbox"/> Site Development Permit |
| <input checked="" type="checkbox"/> Zoning Amendment Application | <input type="checkbox"/> Sign Permit |
| <input type="checkbox"/> Subdivision Approval | <input type="checkbox"/> Alcoholic Beverage Permit |
| <input type="checkbox"/> Building Permit | <input type="checkbox"/> Food Establishment Permit |
| | <input type="checkbox"/> 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 internally-illuminated 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:

Leigh A Pollard
Signature

9/17/2020
Date

Received on/by: _____

Project Number: _____ - _____
Only filled out by staff

Date, initials



BILLING CONTACT FORM

Project Name: 2303 W Hwy 290 Zoning Amendment

Project Address: 2303 W Hwy 290, Dripping Springs, Texas 78620

Project Applicant Name: Jon Thompson, J Thompson Professional Consulting, LLC

Billing Contact Information

Name: Glenn & Leigh Ann Pollard

Mailing Address: 2305 W Hwy 290

Dripping Springs, Texas 78620

Email: pollardleigh@gmail.com Phone Number: (512) 845-6416

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 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 checked="" 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.

Jon Thompson
Signature of Applicant

September 16, 2020
Date