



# CITY COUNCIL AGENDA ACTION FORM

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| <b>AGENDA DATE:</b>                 | 07/12/2022                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                        |           |
| <b>AGENDA SUBJECT:</b>              | PUBLIC HEARING – BOARD OF ADJUSTMENT<br><br>Mary Simpson, applicant, is requesting a variance from the City of Glen Rose Code of Ordinances Chapter 4.09 <i>Mobile Food Vendor</i> to allow both the stationary and commissary location without being entirely enclosed within a building, or hidden from view with an approved opaque screening or behind the primary structure for the vendor located at 1207 NE Big Bend Trail, being Tract: B4-9-1, Abst: A136, A136 MILAM CO SCH LD, TRACT B4-9-1, ACRES .358 |                        |           |
| <b>PREPARED BY:</b>                 | Building/Planning/Code Enforcement Reeves                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | <b>DATE SUBMITTED:</b> | 6/30/2022 |
| <b>EXHIBITS:</b>                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                        |           |
| <b>BUDGETARY IMPACT:</b>            | <b>Required Expenditure:</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | \$00.00                |           |
|                                     | <b>Amount Budgeted:</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | \$00.00                |           |
|                                     | <b>Appropriation Required:</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | \$00.00                |           |
| <b>CITY ADMINISTRATOR APPROVAL:</b> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                        |           |
| <b>SUMMARY:</b>                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                        |           |
| <b>RECOMMENDED ACTION:</b>          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                        |           |