

The City of Woodcreek

IN THE MIDST OF THE TEXAS HILL COUNTRY

REPORT FROM PLANNING & ZONING COMMISSION

To: Chrys Grummert
Council Liaison

Date: November 11, 2024

At our regular meeting on November 6th, it was decided to recommend two (2) items for consideration to Council:

1. The Commission would like its membership reduced from seven (7) to five (5).

It is currently quite difficult to obtain a quorum of four (4) members, reducing the requirement to three (3) members would help.

2. Actionable items that are directed by Council to the Commission should be explicitly detailed in an input form.

While staff had created an input form [copy attached], it was designed for their purposes and inadequate. This form should come from Council via the liaison directly to the Commission Chair. Once the Commission has resolved the task to its satisfaction, they can return the form to the liaison with such resolution detailed. We respectfully leave it to the Council as to the format of such a form.

At this same meeting, it was suggested that we submit suggested questions for the survey that a third party was to create for the public as respects the City Comprehensive Plan. The Commissioners felt that it would be more appropriate for the Planning & Zoning Commission to review the suggested survey after the third party has developed it. It is assumed changes will most certainly be required after the City reviews a first draft. At that point we strongly suggest our input would be most valuable.



Request from City Council for Action on an Item

Meeting Date City Council Voted to Reach Out to Advisory Group: _____

Subject of Item Requested to be Considered:

Item Sent for Consideration **TO:** *(Select one box)*

Comprehensive Plan Advisory Workgroup

Parks and Recreation Board

Hotel Occupancy Tax (H.O.T.) Committee

Planning and Zoning Commission

Infrastructure and Mobility Panel

Tree Board

Ordinance Review Committee

Other: _____

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Date Original Received at City Hall:	
Received by <i>(City Staff Member- PRINT)</i> :	
Date Reviewed/Signed by City Manager:	
Date of Next Advisory Group Meeting:	

(This is a text box. Click inside to type.)

Exact Wording of Motion:

: (This is a text box. Click inside to type.)

Motion Response

Submitted by: _____
PRINTED NAME of Chairperson

Submitted by: _____
SIGNATURE of Chairperson

Date of Submission: _____

City Manager: _____
(Signature)