Appendix C Application







APPLICATION—CITY PLAN BOARD Planning & Development Services

Petition No. 14 - 162 Luc. Fee: \$						
1st Sten Mtg Date	1st Sten Mtg Date: F7 Fee: \$					
Tax Man No	Tay Man No.					
Aggrupt No. 001 660	Account No. 001-660-6680-3401 []					
Account No. 001-660-6680-1124 (Enterprise Zone) [] Account No. 001-660-6680-1125 (Enterprise Zone Credit []						
Account No. 001-000	-0080-1125 (Enter	prise Zone Creai	ונן ן			
n						
Owner(s) of Record (please print) Applicant(s)/Agent(s), if different						
Name: City & Gain	resville	Name: City Plan Roard				
Address:		Address:				
Phone: Fax:		Phone (752) 334-10-Eax:				
(Additional owners may be listed at end of applic.)		5022)				
Note: It is recommended that anyon	ne intending to file a p	etition for amendm	ents to the future land use mo	ap or		
zoning map atlas, meet with the Dep	partment of Communit	y Development pric	or to filing the petition in orde	er to		
discuss the proposed amendment an	d petition process. Fo	uilure to answer all	questions will result in the			
application being returned to the ap						
	REQU	<u>EST </u>				
Check applicable request(s) below:						
Future Land Use Map	Zoning Map []		Master Flood Control M	ap []		
Present designation: INST (*) Present designation			Other [] Specify:			
Requested designation: CON	Requested designation:					
(TUTIONAL						
INFORMATION ON PROPERTY						
1. Street address: 3800 Block of theoretical NW ITE PLACE SE						
2. Map no(s): 7856						
3. Tax parcel no(s): 10862-00(-000						
4. Size of property: 97.8 acre(s) approximately						
All requests for a land use or zoning change for property of less than 3 acres are encouraged to submit a market						
analysis or assessment, at a minimum, justifying the need for the use and the population to be served. All						
proposals for property of 3 acres or more must be accompanied by a market analysis report.						

Certified Cashier's Receipt:

Phone: 352-334-5022

- 5. Legal description (attach as separate document, using the following guidelines):
 - a. Submit on 8 ½ x 11 in. sheet of paper, separate from any other information.
 - b. May not be included as part of a Purchase Agreement, Contract for Sale, Lease Agreement, Transfer of Title, Warranty Deed, Notice of Ad Valorem Taxes, Print-outs from Property Appraiser's Office, etc.
 - c. Must correctly describe the property being submitted for the petition.
 - d. Must fully describe directions, distances and angles. Examples are: North 20 deg. West 340 feet (not abbreviated as N 20 deg. W 340'); Right-of-Way (not abbreviated as R/W); Plat Book (not abbreviated as PB); Official Records Book 1, page 32 (not abbreviated as OR 1/32); Section 1, Township 9 South, Range 20 East (not abbreviated as S1-T9S-R20E).
 - 6. INFORMATION CONCERNING ALL REQUESTS FOR LAND USE AND/OR ZONING CHANGES (NOTE: All development associated with rezonings and/or land use changes must meet adopted level of service standards and is subject to applicable concurrency requirements.)

equirem	enis.)		
A.	What are	What are the existing surrounding land uses?	
	North	Institutional (County) - undeveloped, needed	
	South	Conservation (Morningside Nature Center) Education (Professional Academies Magnetat Loften W. Travis High School)	
	East	Institutional (County) -underlyed, wooded	
	West	Conservation: « undereloped, wooded.	
В.	Are there other properties or vacant buildings within ½ mile of the site that have the proper land use and/or zoning for your intended use of this site?		
	NO	YES If yes, please explain why the other properties cannot accommodate the proposed use?	
	MA	- land purchased by City for conservation and passive recreation	

res	sidential, what are the impacts of the proposed use of the property on the following:
$\mathcal{N}^{\mathcal{F}}$	Residential streets
,	Noise and lighting
D.	Will the proposed use of the property be impacted by any creeks, lakes, wetlands, native vegetation, greenways, floodplains, or other environmental factors or by property adjacent to the subject property?
	NO (If yes, please explain below)
	Proposed consenation and passine recreation who will be favorably imparted by it is he thought and other nature vegetation, and by its adjacency to morningside nature Center.
E.	Does this request involve either or both of the following?
	 a. Property in a historic district or property containing historic structures? NO YES b. Property with archaeological resources deemed significant by the State? NO YES
F.	Which of the following best describes the type of development pattern your development will promote? (please explain the impact of the proposed change on the community):
	Redevelopment Urban Infill Activity Center Urban Fringe Strip Commercial Traditional Neighborhood Conservation passive recreation

C. If the request involves nonresidential development adjacent to existing or future

Purchase pa	Listing recreation
G. Publi	What are the potential long-term economic benefits (wages, jobs & tax base)? z conferration land is a public ameni
Н.	What impact will the proposed change have on level of service standards? Roadways None
	Recreation Will add to Apply of open space and passive recreation land
×	Water and Wastewater
	Solid Waste Mone
	Mass Transit None
I.	Is the location of the proposed site accessible by transit, bikeways or pedestrian facilities? NO (please explain)

CERTIFICATION

TL-Applications-djw

The undersigned has read the above application and is familiar with the information submitted. It is agreed and understood that the undersigned will be held responsible for its accuracy. The undersigned hereby attests to the fact that the parcel number(s) and legal description(s) shown in questions 3 and 5 is/are the true and proper identification of the area for which the petition is being submitted. Signatures of all owners or their agent are required on this form. Signatures by other than the owner(s) will be accepted only with notarized proof of authorization by the owner(s).

Owner of Record	Owner of Record
Name: Cty & Canesyle	Name:
Address:	Address:
Phone: Fax:	Phone: Fax:
Signature:	Signature:
	O (Pressed
Owner of Record	Owner of Record
Name:	Name:
Address:	Address:
Di Corre	Phone: Fax:
Phone: Fax:	Signature:
Signature:	Signature.
	ill be ultimately approved or rejected in any form. e call (352) 334-5022 or 334-5023 for an appointment. Dlan Muns AlCh Owner/Agent Signature December 15, 2014 Date
COUNTY OF	
Sworn to and subscribed before me this	day of20, by (Name)
Personally Known OR Produced Identifica	Signature – Notary Public
1 6150 hairy Known OK 1 roduced identified	(\(\frac{1}{2}\)\po_{\(\frac{1}{2}\)}