



NEIGHBORHOOD GROUP NOTICES

A zoning change is requested for the property shown on the attached map. You are listed as an organization within a ½ mile of the proposed change. The purpose of this notice is to provide you with an opportunity for public comment.

You may:

1. Attend the public hearing to present your views and opinions or just merely to observe the proceedings; or
2. Provide a written statement to the Chair of the Commission expressing your support, concerns, or opposition to this case; or
3. Take no further action

Approval or denial of the proposed zoning change by the Zoning Commission is only a recommendation to the City Council. City Council makes the final determination on the outcome of a zoning change.

If you want to comment on this case, please return the form below with any additional written commentary. Letters can be submitted via mail or email as described below. Please submit your response by the Monday before the hearing by 5:00 pm. All letters should reference the relevant case number.

Email: zoninglanduse@fortworthtexas.gov

Mail: Chair of the Zoning Commission
c/o Development Services, City Hall
100 Fort Worth Trail, Fort Worth, TX 76102

To register to speak at the Zoning Commission hearing, please visit fortworthtexas.gov/calendar and select the Zoning Commission meeting date. The deadline for speaker registration is 5:00 p.m. the day before the hearing.

To register to speak at the City Council hearing, please visit fortworthtexas.gov or contact the City Secretary's Office at 817-392-6150.

PUBLIC HEARING DATES	
Zoning Commission	
City Council	
Location: 200 Texas St Council Chambers, Second Floor	
LOCATION MAP	

Case Number:		
Applicant:	Site Address:	Council District:
Current Zoning:	Proposed Zoning:	Proposed Use:

Please complete the section below for your organization, or send a separate letter to the email or mailing address listed above.

Organization Name:	Oppose	Support
Signature of Representative:	Printed Name of Representative:	

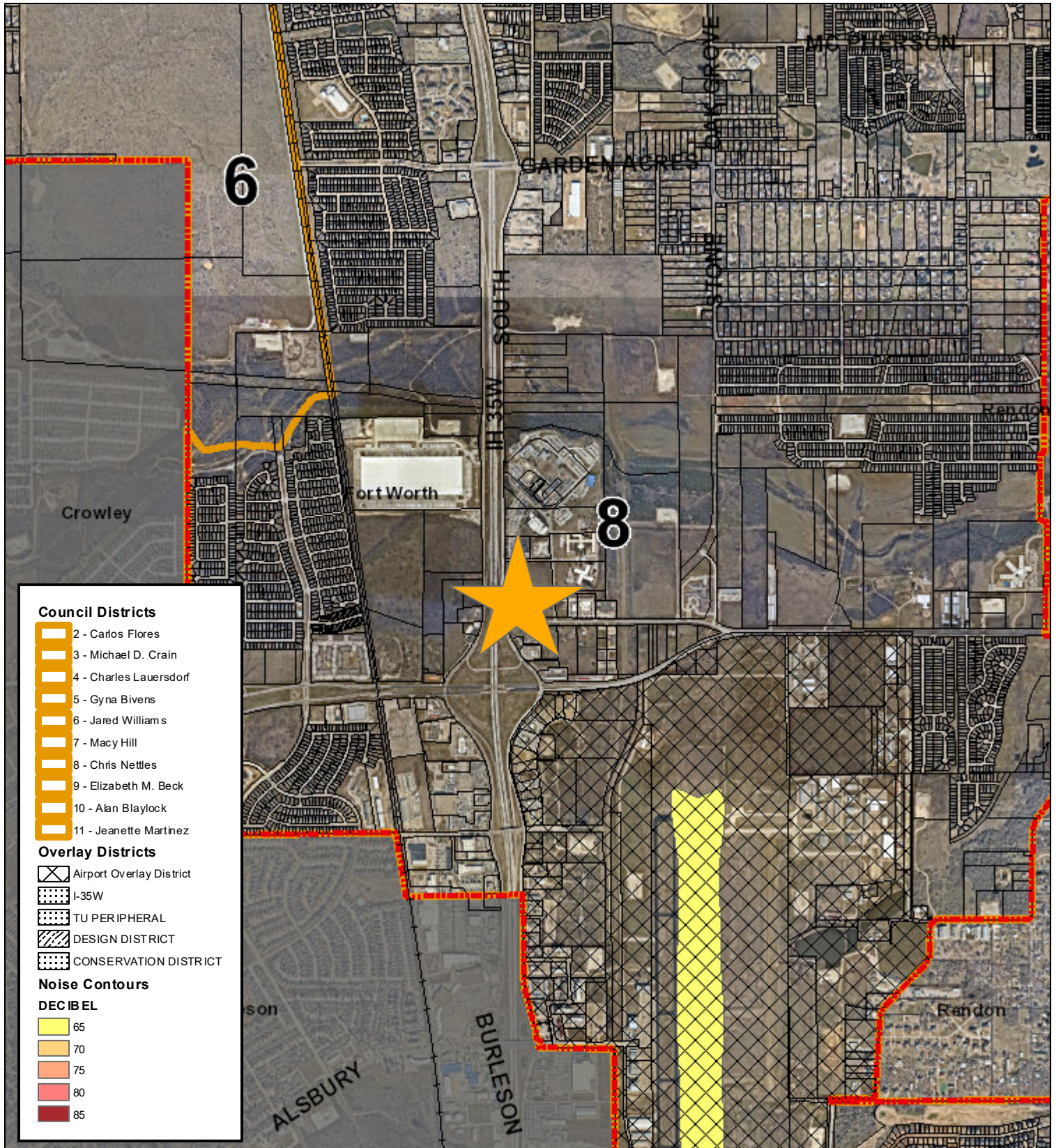
Aerial Photo Map



0 215 430 860 Feet



Area Map



Council Districts

- 2 - Carlos Flores
- 3 - Michael D. Crain
- 4 - Charles Lauerdorf
- 5 - Gyna Bivens
- 6 - Jared Williams
- 7 - Macy Hill
- 8 - Chris Nettles
- 9 - Elizabeth M. Beck
- 10 - Alan Blaylock
- 11 - Jeanette Martinez

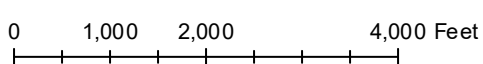
Overlay Districts

- Airport Overlay District
- I-35W
- TU PERIPHERAL
- DESIGN DISTRICT
- CONSERVATION DISTRICT

Noise Contours

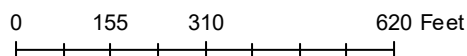
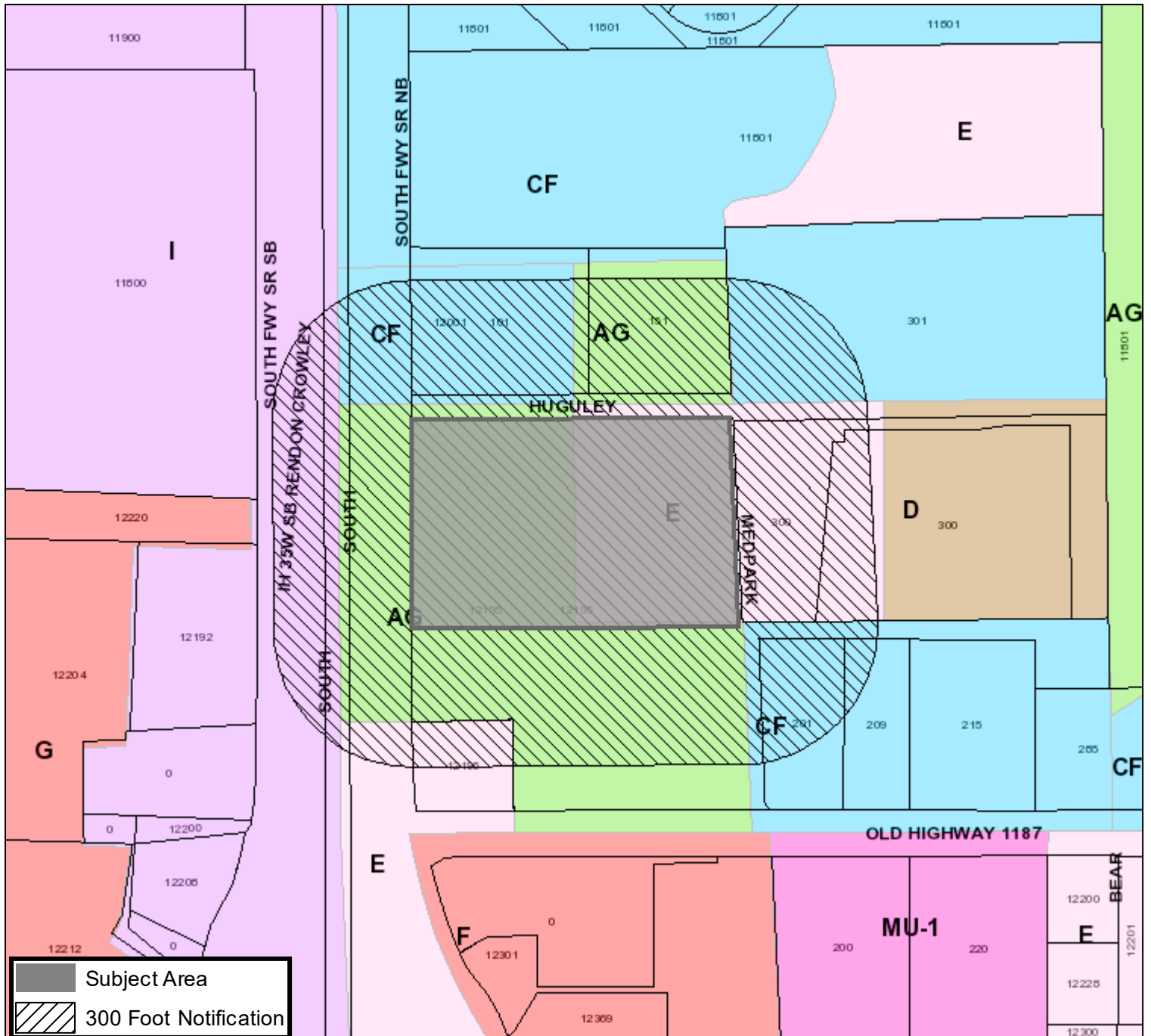
DECIBEL

- 65
- 70
- 75
- 80
- 85

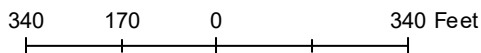
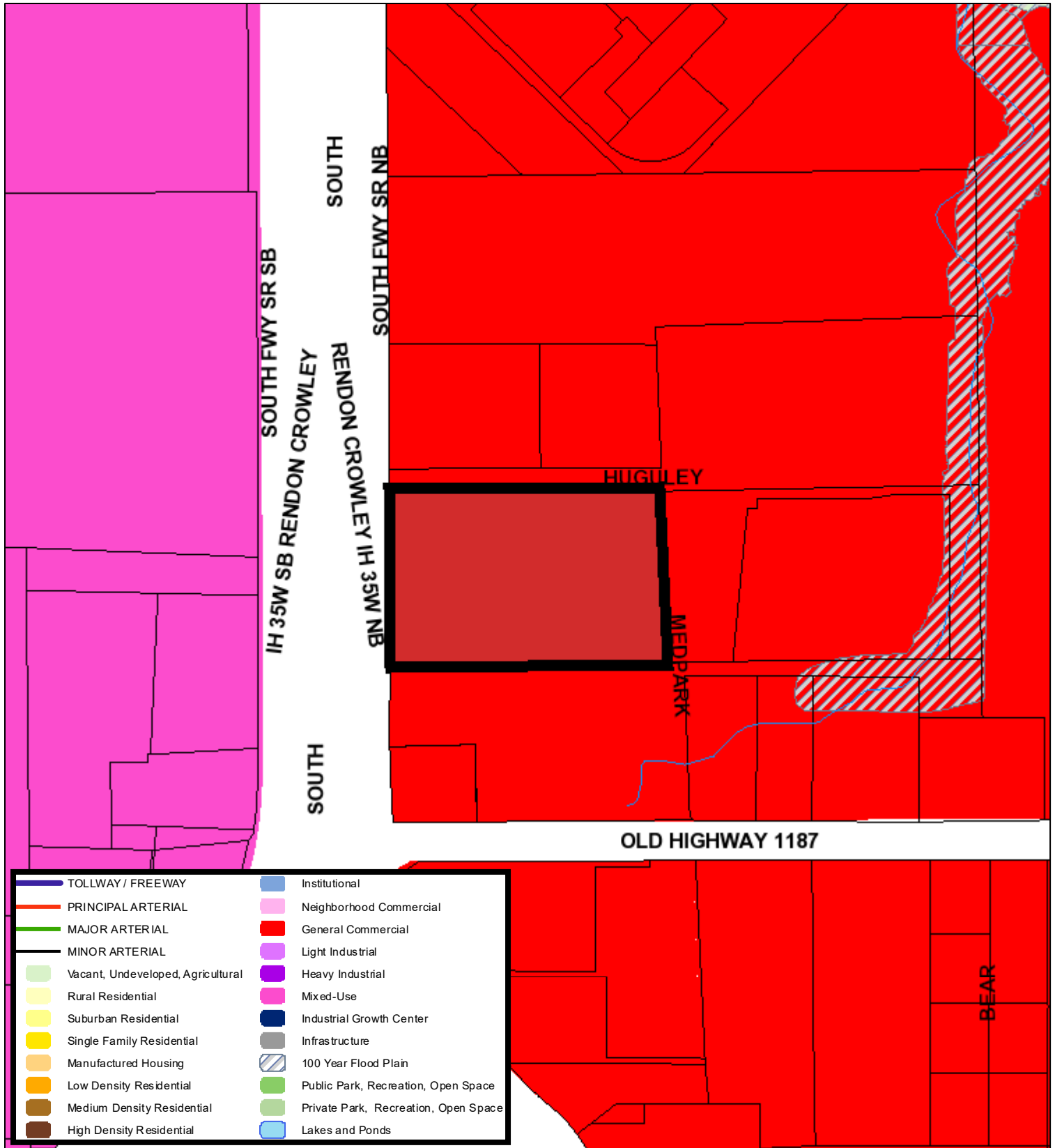


Area Zoning Map

Applicant: Adventist Health System by Teague, Nall & Perkins
 Address: 12195 South Freeway
 Zoning From: AG, E
 Zoning To: CF
 Acres: 7.267
 Mapsco: Text
 Sector/District: Far_South
 Commission Date: 3/12/2025
 Contact: 817-392-8028



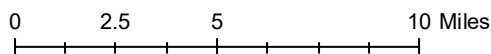
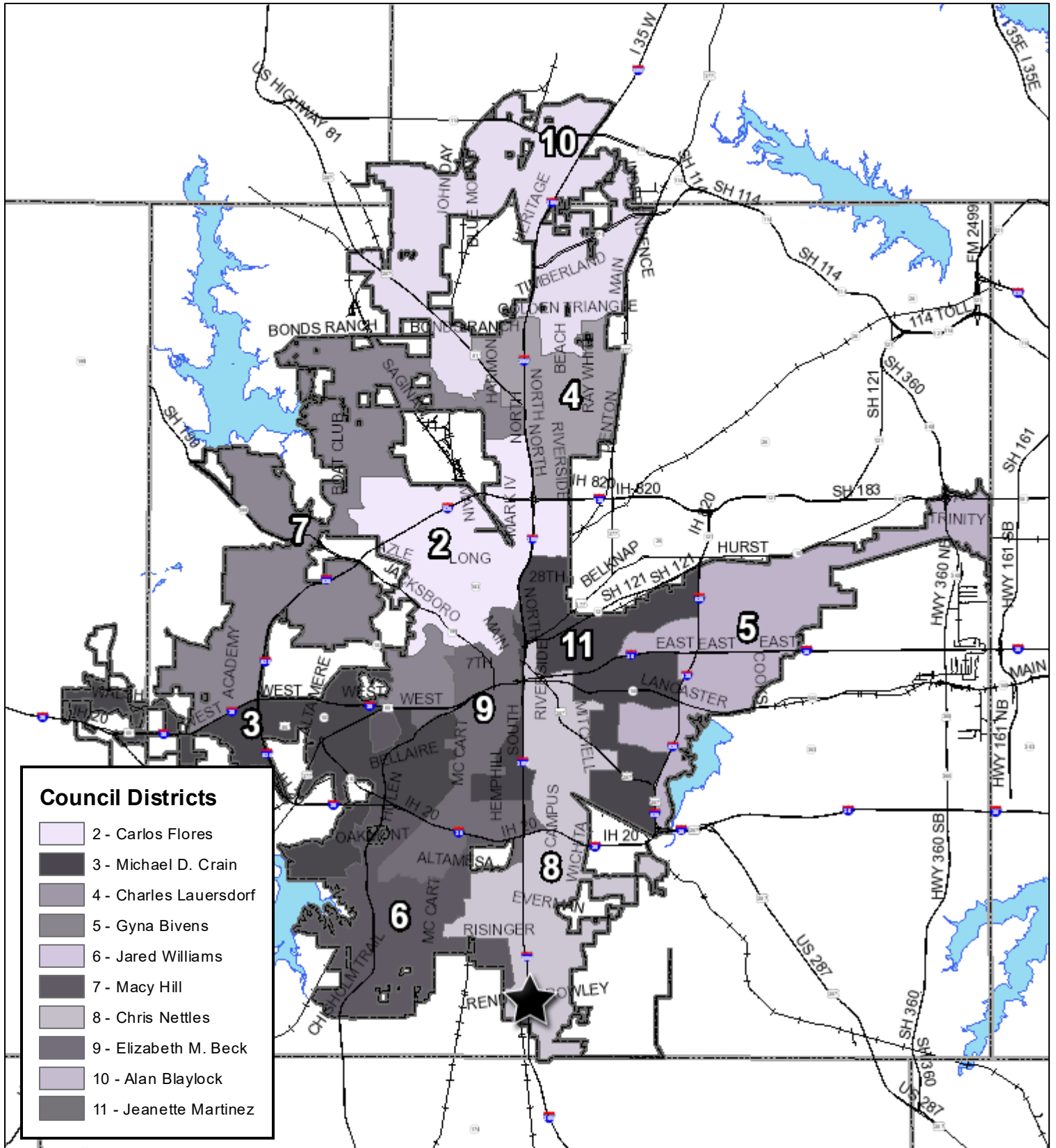
Future Land Use



A Comprehensive Plan shall not constitute zoning regulations or establish zoning district boundaries. (Texas Local Government Code, Section 213.005.) Land use designations were approved by City Council on March 6, 2018.



Location Map





ZONING CHANGE / SITE PLAN APPLICATION

CONTACT INFORMATION

PROPERTY OWNER Adventist Health System/Sunbelt, Inc. (dba. Huguley Memorial Hospital)

Mailing Address 11801 S. Freeway City, State, Zip Fort Worth, TX 76115

Phone 817.293.9110 Email Penny.Johnson@AdventHealth.com

APPLICANT Adventist Health System/Sunbelt, Inc. (dba. Huguley Memorial Hospital)

Mailing Address 11801 S. Freeway City, State, Zip Fort Worth, TX 76115

Phone 817.293.9110 Email Penny.Johnson@AdventHealth.com

AGENT / OTHER CONTACT Scott Gibson (Teague, Nall & Perkins, Inc.)

Mailing Address 3200 S. Interstate 35E, Suite 1129 City, State, Zip Denton, Texas 76210

Phone 817.665.7158 Email sgibson@tnpinc.com

Note: If the property owner is a corporation, partnership, trust, etc., documentation must be provided to demonstrate that the person signing the application is legally authorized to sign on behalf of the organization.

PROPERTY DESCRIPTION

Site Location (Address or Block Range): 12195 South Freeway or 130 Huguley Boulevard

Total Rezoning Acreage: 7.3 I certify that an exhibit map showing the entire area to be rezoned is attached.

If multiple tracts are being rezoned, the exhibit map must clearly label each tract and the current and proposed zoning districts. A platted lot description or certified metes and bounds description is required for each tract, as described below.

Is the property platted?

YES - PLATTED

Subdivision, Block, and Lot (list all): _____

Is rezoning proposed for the entire platted area? Yes No Total Platted Area: _____ acres

Any partial or non-platted tract will require a certified metes and bounds description as described below.

NO – NOT PLATTED

A Registered Texas Surveyor’s certified metes and bounds legal description is required. The boundary description shall bear the surveyor’s name, seal, and date. The metes and bounds must begin at a corner platted lot or intersect with a street. All metes and bounds descriptions must close. If the area to be rezoned is entirely encompassed by a recorded deed, a copy of the deed description is acceptable. The certified metes and bounds description must be provided in Microsoft Word format.

Total Area Described by Metes and Bounds: 7.3 acres

APPLICATION TYPE

Please check the box next to the description that applies to your project. Make sure to select the corresponding application type when submitting your application in Accela (Zoning Change or Site Plan Amendment).

Zoning Change Application	Site Plan Amendment
<input checked="" type="checkbox"/> Rezoning from one standard zoning district to another <input type="checkbox"/> Rezoning to Planned Development (PD) District <input type="checkbox"/> Adding a Conditional Use Permit (CUP) Overlay <input type="checkbox"/> Modifying development standards, waivers, and/or land uses for an existing PD or CUP	<input type="checkbox"/> Submitting a required site plan for an existing PD <i>(no change to development standards or waivers)</i> <input type="checkbox"/> Amending a previously approved PD or CUP site plan Existing PD or CUP Number: _____ Previous Zoning Case Number: _____

DEVELOPMENT INFORMATION

Current Zoning District(s): E/AG Proposed Zoning District(s): CF

Current Use of Property: Vacant

Proposed Use of Property: Medical Office Building (MOB) w/ Orthopaedic Clinic, Imaging, Therapy, and Surgery

For Planned Development (PD) Requests Only

First, reference Ordinance [Section 4.300](#) to ensure your project qualifies for PD zoning. If so, complete the following:

Base Zoning District Proposed for PD: _____

Land Uses Being Added or Removed: _____

Are Development Standards or Waivers being requested? Yes No If yes, please list below:

- Site Plan Included (completed site plan is attached to this application)
- Site Plan Required (site plan will be submitted at a future time for approval by Zoning Commission and City Council)
- Site Plan Waiver Requested (in the box above, explain why a waiver is needed)

For Conditional Use Permit (CUP) Requests Only

Current Zoning of Property: _____

Additional Use Proposed with CUP: _____

Are Development Standards or Waivers being requested? Yes No If yes, please list below:

- A site plan meeting requirements of the attached checklist is included with this application (required for all CUP requests)



DETAILED PROJECT DESCRIPTION

Please provide a detailed summary of your proposal below. This should include a detailed description of the proposed use and reason for rezoning, how this use is compatible with surrounding land uses and the City's Comprehensive Plan, and any other details relevant to your request. Feel free to attach additional pages, concept plans, etc. as needed.

For PD or CUP requests, please explain why your proposal cannot be accommodated by standard zoning districts, clarify if any waivers are being requested and why, and detail any changes from previously approved site plans or development standards.

Adventist Health System Inc. is part of the Texas Health Huguley System. The requested the zoning change is to permit the expansion of their Texas Health Huguley campus and develop a Center for Orthopedic Excellence. This facility is intended to provide space for the expansion of their existing Physical Therapy, Imaging, and Surgical lines of service along with an Independent Orthopedic Clinic. This development will allow for an increased level of quality healthcare services in the area.

The subject Property is currently zoned E and AG. The Property to the North is the Texas Health Huguley medical campus consisting of a hospital and multiple medical office buildings. The Property to the West is a freeway (1-35 E). The property to the South is vacant and under the same Ownership as the subject property. The property to the East is a combination of vacant land and an independent living facility. The subject property is designated for future General Commercial use per the 2023 Ft. Worth Land Use Plan.

ADDITIONAL QUESTIONS

1. **Is this property part of a current Code Compliance case?** Yes No If yes, please explain:

2. **Is the purpose of this request to provide a reasonable accommodation for a person(s) with disabilities?** Yes No

If yes, this application will be directed to the Development Services Director or Zoning Administrator for review pursuant to Ordinance No. 22098-03-2016, "Reasonable Accommodation or Modification for Residential Uses." Applications under a Reasonable Accommodation Ordinance review will not be heard by the Zoning Commission. Please see Ordinance No. 22098-03-2016 (Chapter 17, Division V) for more information. *(Note to staff: If yes, send a copy of this application and any attachments to the Zoning Administrator as soon as possible.)*

3. **Have you contacted the relevant Council Member to discuss your proposal?** Yes No [Click to find your Council District.](#)

4. **Have you contacted nearby neighborhood organizations and property owners to discuss your proposal?** Yes No

The [Fort Worth Neighborhood Database](#) includes contact information for each registered organization. To find a list of organizations in close proximity to your site, please use the [Online Zoning Map](#) or contact [Community Engagement](#). All registered groups within ½ mile of your site and property owners within 300 feet will be notified of the request.

5. **Would you need Translation Services to explain your case and answer questions at either the Zoning Commission and/or at City Council hearing?** (at no cost to you)

¿Va usted a necesitar servicios de traducción para explicar y contestar preguntas sobre su caso ante la Comisión de Zonificación y/o frente al Consejo de la Ciudad? (sin coste para usted) Sí No

If yes, please explain in which language you need translation/ *Si así lo quiere, explique en qué idioma:* _____

6. **The following items are required with your application.** Please confirm submittal by checking each item below.

- Completed copy of Zoning Change Application with original signatures (pages 2-6)
- Corporate documents demonstrating signature authority if property owner is a corporation, partnership, trust, etc.
- A copy of the recorded plat or certified metes and bounds description (page 2)
- An exhibit map showing the entire area to be rezoned with labels for current and proposed zoning districts
- If requesting Planned Development (PD) zoning or a Conditional Use Permit (CUP):
 - Site Plan meeting requirements of attached checklist (pages 7-8)
 - A list of all waiver requests with specific ordinance references

ACKNOWLEDGEMENTS / LETTER OF AUTHORIZATION FOR ZONING CASE REPRESENTATION

I certify that the above information is correct and complete to the best of my knowledge and ability and that I am now, or will be, fully prepared to present the above proposal before the Zoning Commission and City Council public hearings. I further certify that I have read and understand the information provided, concerning the policies and procedures regarding consideration of my zoning request.

I understand that Planning staff will not conduct a plan review for this development and any and all development / design standards must be adhered to unless otherwise specified through a waiver.

I understand that all recommendations of the Zoning Commission will be forwarded to the City Council for final determination, normally scheduled for the second Tuesday of the following month. I further understand that any actions of the Zoning Commission are considered recommendations to the City Council and that I may be heard by the City Council at the prescribed Council hearing date where a final decision will be made.

I further understand that if I am not present nor duly represented at the Commission's public hearing, the Zoning Commission may dismiss my request, which constitutes a recommendation that the request be denied. I further understand that if I am not present, or duly represented, at the City Council public hearing, the City Council may deny my request.

I reserve the right to withdraw this proposal at any time, within 14 days of the deadline filing date, upon written request filed with the Executive Secretary of the Commission. Such withdrawal shall immediately stop all proceedings thereon; provided, however, case withdrawal, filed any time after the 14 days following the filing deadline, shall constitute a denial by the Commission and City Council. I understand my filing fee is not refundable upon withdrawal of my case application after public notice, nor following denial by the Commission or Council of my case. I / we respectfully request approval and adoption of the proposed zoning / land use of property, within the City of Fort Worth, as identified in this application.

SIGN INSTALLATION AUTHORIZATION

Authority is hereby granted to the City of Fort Worth, or its agent, to install upon the above described property, sign or signs in a conspicuous place, or places, at a point, or points nearest any right-of-way, street, roadway or historic designation, or, special exception or public thoroughfare abutting said property. Such sign or signs indicate that a zoning amendment is proposed and that further information can be acquired by telephoning the number indicated. I shall inform City Staff if the sign is removed, lost, or otherwise ceases to be displayed on my property during the processing of the zoning case.

Signed by: Penny Johnson
Owner's Signature (of the above referenced property): EDE5D74100574D8...

Owner's Name (Printed): Penny Johnson (Adventist System, Inc.)

If application is being submitted by an applicant or agent other than the property owner, complete the section below:

AUTHORITY IS HEREBY GRANTED TO (NAME) Scott Gibson (Teague, Nall & Perkins) ACTING ON MY BEHALF AS THE OWNER OF THIS PROPERTY AS INDICATED AT THE APPRAISAL DISTRICT, TO FILE AND PRESENT AN APPLICATION TO THE CITY OF FORT WORTH, TEXAS, TO REQUEST A CHANGE IN ZONING CLASSIFICATION FOR THE FOLLOWING PROPERTY:
Stone, Green B Survey, Abstract 1401, Tract 2 (CERTIFIED LEGAL DESCRIPTION)

Signed by: Penny Johnson
Owner's Signature (of the above referenced property): EDE5D74100574D8...

Penny Johnson (Adventist Health System, Inc)
Owner's Name (Printed)

DocuSigned by: Scott Gibson
Applicant or Agent's Signature: 01D3B25E0EF3469...

Scott Gibson (Teague, Nall & Perkins)
Applicant or Agent's Name (Printed):



SITE PLAN CHECKLIST AND REQUIREMENTS

Planned Development (PD) and Conditional Use Permit (CUP) Requests

Items to be Shown on All Site Plans

Project Identification:

- Site Address and Legal Description
- Title of project or development (in bold letters) in the lower righthand corner of the plan
- Date of preparation or revision, as applicable
- Name, address, and telephone number of engineer, architect, surveyor, and developer/owner
- Vicinity map, north arrow, and scale
- Label the zoning case number in the lower righthand corner of the plan, below the title
- Provide a signature line labeled: "Director of Development Services" with a "Date" line above the project title

Site Conditions:

- Buildings and Structures – The location and dimensions of all existing and proposed buildings and structures on the site, including those proposed for removal; the specific category of land/occupancy use(s) to be contained therein; the gross floor area, number of stories, land density per net acre of any residential buildings to remain or proposed, building height and separation, exterior construction material(s); and the location of all entrances and exits to buildings.
- Streets, Parking, and Drives – The location, paving and Right-of-Way widths, dimensions, and type(s) of all existing and proposed surface materials of perimeter and internal public and private streets, driveways, entrances, exits, parking and loading areas, including the number of off-street parking and ADA spaces, access ramps, wheel stops/curbing, and internal vehicular circulation pattern(s) or flow diagrams.
- Supplemental Surfaces – The types of surfacing (e.g. grass turf, gravel, walks, etc. elsewhere existing or proposed on the site that is not proposed for vehicular paving and circulation.
- Dumpsters/Air Conditioners/Compactors – The size and location of all garbage containers, compactors, ground mounted air conditioners, etc., including the screening material identification and height thereof.
- Fences and Screening – Location, material, and height of all screen fences, walls, screen plantings, or bufferyards.
- Setbacks and Easements – Show all utility, drainage, and other easements, and all setbacks as appropriate to the zoning district and recorded plats.
- Land Use and Zoning – Label the land use and zoning classifications of both the site area and the immediately adjacent properties abutting the site.
- For Multifamily Site Plans - Provide a diagram showing areas being counted towards open space. If a waiver is required, provide a specific minimum percentage or other language defining how open space will be calculated for your project.

General Notes:

The following notes should be included on all site plans:

- This project will comply with [Section 6.301, Landscaping](#).
 - o *Note: For multifamily projects, revise this note to state: "This project will comply with Enhanced Landscaping Requirements for Section ____." (reference section for your specific zoning district)*
- This project will comply with [Section 6.302, Urban Forestry](#).
- All signage will conform to [Article 4, Signs](#).
- All provided lighting will conform to the Lighting Code.

For multifamily projects in CR, C, or D districts, also include the following note:

- This project will comply with the Multifamily Design Standards (MFD) and an MFD Site Plan shall be submitted.

Please make sure to carefully review the development and design standards for your zoning district in [Chapter 4](#) of the Zoning Ordinance. If any waivers from these requirements are being requested, they must be clearly listed on the application and site plan. Once a site plan is approved by City Council, a PD or CUP Amendment will be required to add or modify any waivers. This is a full rezoning (public hearing) process that cannot be approved administratively.

Note: Approval of a zoning site plan does not waive health and safety requirements from Platting, Transportation/Public Works, Fire, Park & Recreation, and Water Department. These items cannot be waived through the Zoning Commission and City Council. Approval of the zoning site plan does not constitute the acceptance of conditions from these departments.

