

NEIGHBORHOOD GROUP NOTICES

A zoning change is requested for the property shown on the attached map. You are listed as an organization within a $\frac{1}{2}$ mile of the proposed change. The purpose of this notice is to provide you with an opportunity for public comment. You may:

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 200 Texas St, Fort Worth, TX 76102 Zoning Commission
City Council
Location: 200 Texas St. Council Chambers, Second Floor
LOCATION MAP

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.

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 Sup	pport
Signature of Representative:	Printed Name of Representat	ive:

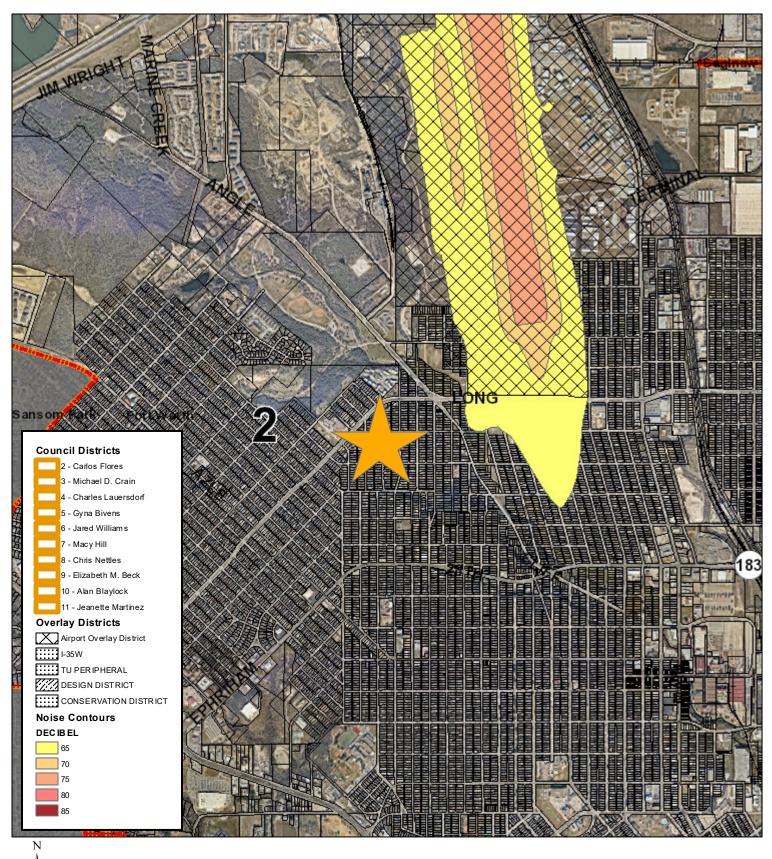


Aerial Photo Map









1,000



Applicant: Zion Christian Church Address: 3200 McKinley Street

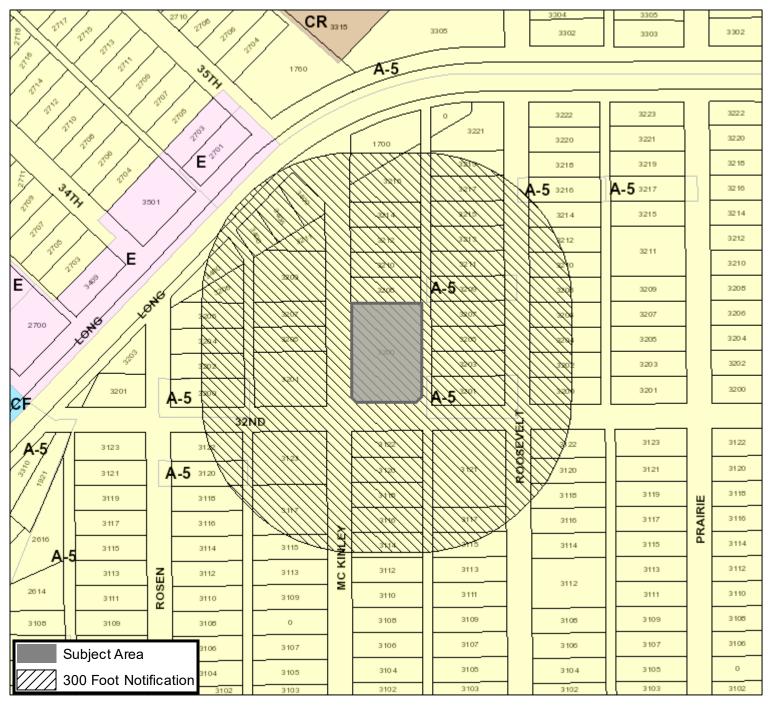
Zoning From: A-5 Zoning To: CF

Acres: 0.64048013

Mapsco: Text Sector/District: Northside Commission Date: 9/11/2024

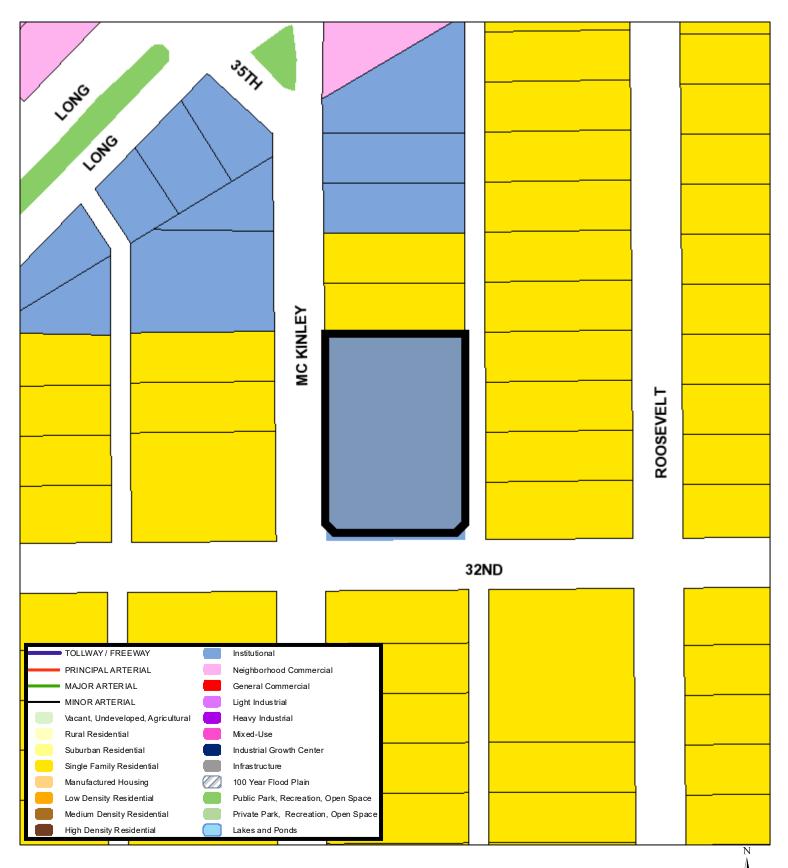
Contact: null







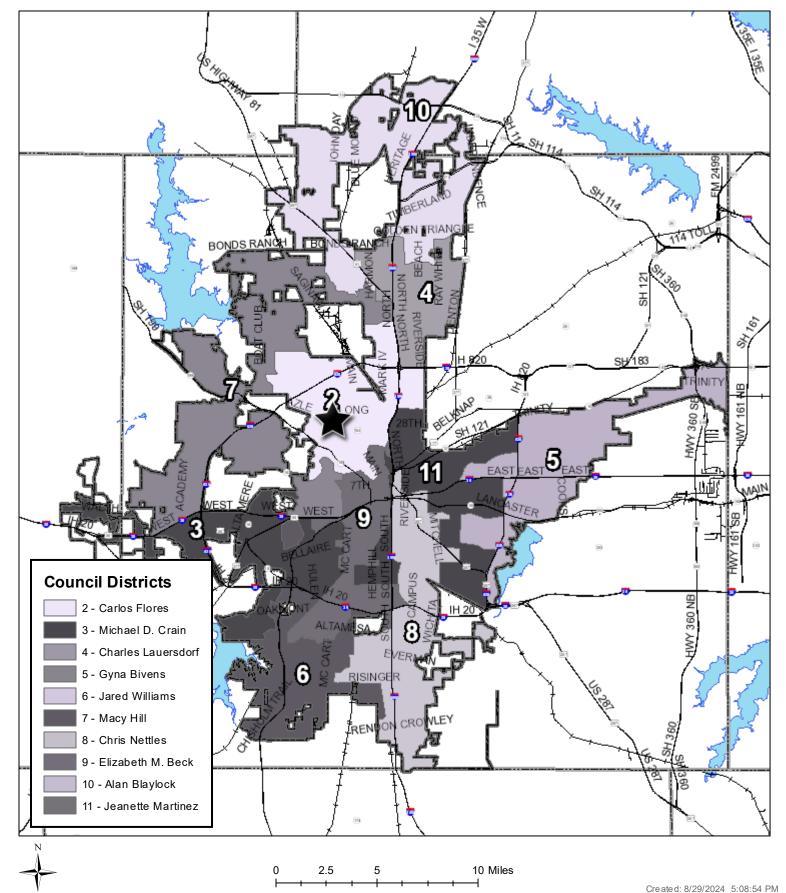
Future Land Use



90 Feet

45





FORT WORTH

ZONING CHANGE / SITE PLAN APPLICATION

CONTACT INFORMATION

PR(OPERTY OWNER Zion Christian Church
Ma	operty owner Christian Church illing Address State, Zip Fort Worth, Tx 76
Pho	neEmailEmailEmail
AP	PLICANT Alicia Watson
Ma	iling Address 4509 Nautius Cir City, State, Zip FortWorth TX 7101000 one 901-318-8852 Email alicianakials@gmail Com
Pho	one 901-318-8852 Email alicianakial8@gmail. Com
	ENT / OTHER CONTACT
Ma	iling Address City, State, Zip
	one Email
	e: If the property owner is a corporation, partnership, trust, etc., documentation must be provided to demonstrate that the son signing the application is legally authorized to sign on behalf of the organization.
Site	PROPERTY DESCRIPTION Location (Address or Block Range): 3260 Mc Kinley Ave Fortworth, TX 76106
	al Rezoning Acreage: _06404 _ Certify that an exhibit map showing the entire area to be rezoned is attached.
-	ultiple tracts are being rezoned, the exhibit map must clearly label each tract and the current and proposed zoning districts. A platted lot cription or certified metes and bounds description is required for each tract, as described below.
Is ti	ne property platted?
	YES - PLATTED Subdivision, Block, and Lot (list all): Lot 21-R, Block 17, Worth Hill Addition
	Is rezoning proposed for the entire platted area? 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: 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
Rezoning from one standard zoning district to another	☐ Submitting a required site plan for an existing PD
☐ Rezoning to Planned Development (PD) District	(no change to development standards or waivers)
☐ Adding a Conditional Use Permit (CUP) Overlay	☐ Amending a previously approved PD or CUP site plan
☐ Modifying development standards, waivers, and/or land	Existing PD or CUP Number:
uses for an existing PD or CUP	Previous Zoning Case Number:
DEVELOPMENT	그리고 그 동생들이 되는 것으로 모르는 모르는 그 그 그 그래요요요요요요요요요요요요요요요요요요요요요요요요요요요요요요
Current Zoning District(s): $A-5$	Proposed Zoning District(s):
Current Use of Property: Church	9
Proposed Use of Property: Church the building	behind the Church will be day car
For Planned Developme	ent (PD) Requests Only
irst, reference Ordinance <u>Section 4.300</u> to ensure your project	qualifies for PD zoning. If so, complete the following:
ase Zoning District Proposed for PD:	
and Uses Being Added or Removed:	
re Development Standards or Waivers being requested? ☐ Ye	No If yes, please list below:
I Site Plan Included (completed site plan is attached to this app	lication)
Isite Plan Required (site plan will be submitted at a future time) Site Plan Waiver Requested (in the box above, explain why a	
For Conditional Use Perr	mit (CUP) Requests Only
urrent Zoning of Property:	
dditional Use Proposed with CUP:	
re Development Standards or Waivers being requested? ☐ Ye	s 🗆 No If yes, please list below:
·* · · · · · · · · · · · · · · · · · ·	x

☐ 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.

* * * * * * * * * * * * * * * * * * *		
	*	

ADDITIONAL QUESTIONS

s this property part of a current Code Compliance case? Yes If yes, please explain:
s 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. Plea see Ordinance No. 22098-03-2016 (Chapter 17, Division V) for more information. (Note to staff: If yes, send a copy this application and any attachments to the Zoning Administrator as soon as possible.)
Have you contacted the relevant Council Member to discuss your proposal? 🗆 Yes 🗆 No Click to find your Council District
Have you contacted the relevant council Member to discuss your proposal. By les and <u>chek to find your council bistrict</u>
The <u>Fort Worth Neighborhood Database</u> includes contact information for each registered organization. To find a list organizations in close proximity to your site, please use the <u>Online Zoning Map</u> or contact <u>Community Engagement</u> . registered groups within ½ mile of your site and property owners within 300 feet will be notified of the request.
Would you need Translation Services to explain your case and answer questions at either the Zoning Commission and/c
at City Council hearing? (at no cost to you) NO
¿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:
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.

Owner's Signature (of the above referenced property):	A Contract of the Contract of
Owner's Name (Printed): Immaruel Tava	9
If application is being submitted by an applicant or agent o	ther than the property owner, complete the section below:
AUTHORITY IS HEREBY GRANTED TO (NAME)	Watson Acting on My
	APPRAISAL DISTICT, TO FILE AND PRESENT AN APPLICATION TO THE CITY
OF FORT WORTH, TEXAS, TO REQUEST A CHANGE IN	ZONING CLASSIFICATION FOR THE FOLLOWING PROPERTY:
, * *	(CERTIFIED LEGAL DESCRIPTION)
A.	The second secon
Most,	Allicia Watton
Owner's Signature (of the above referenced property)	Applicant or Agent's Signature
Emmanuel Tava	Alicia Watson
Owner's Name (Printed)	Applicant or Agent's Name (Printed):