

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:

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 PUBLIC HEARING DATES

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.

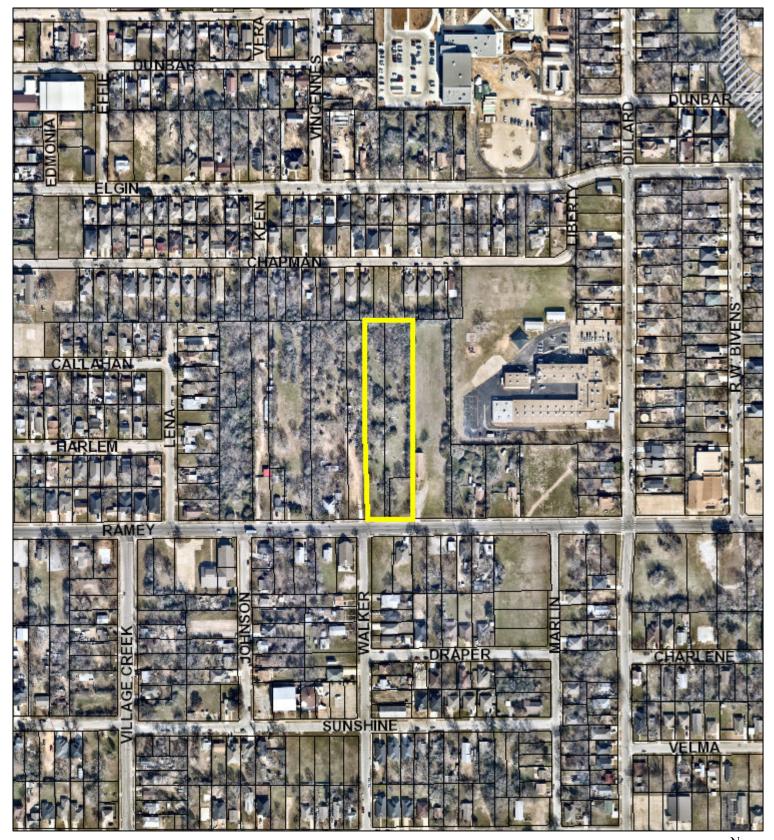
Case Number:				
Applicant:	Site Address:	Council District:		
Current Zoning:	Proposed Zoning:	Proposed Use:		

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

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

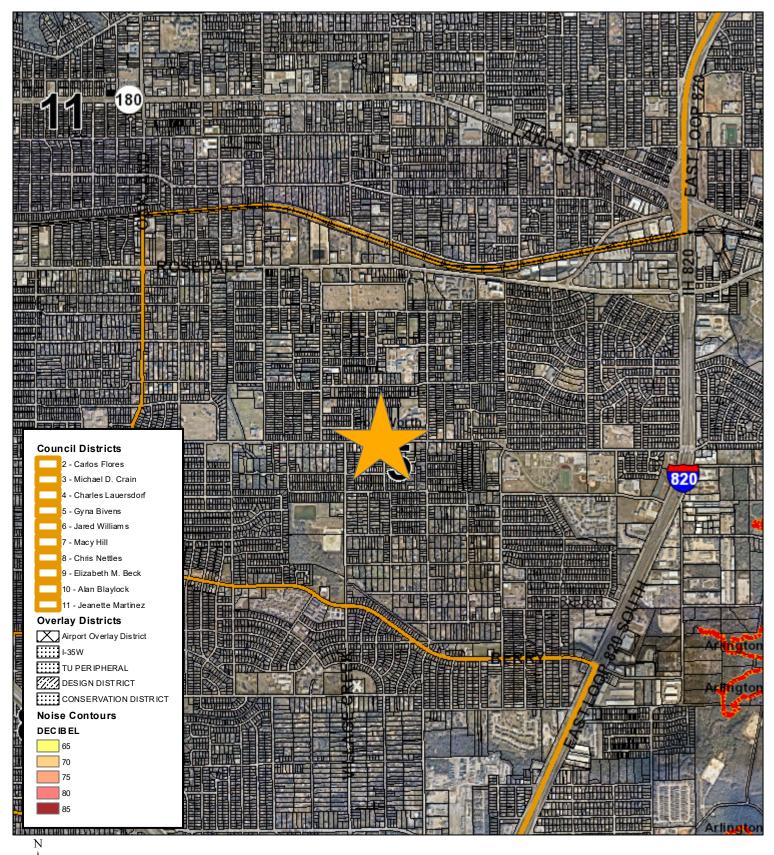


Aerial Photo Map











Area Zoning Map Ft Worth Housing Authority/Child Care Associates

Applicant:

Address: 5033 & 5105 Ramey Avenue

Zoning From: A-5

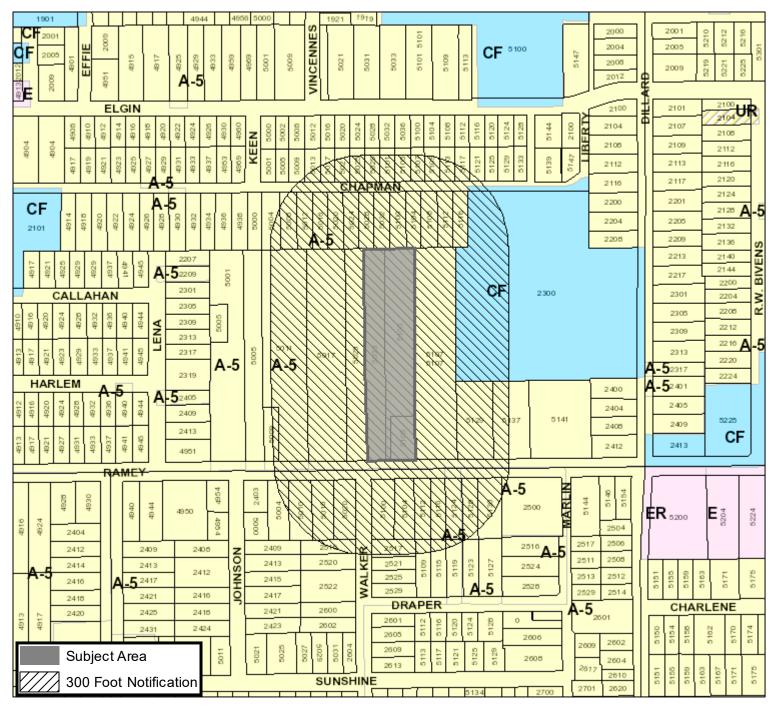
Add a CUP for Child Care Zoning To:

2.48715726 Acres:

Text Mapsco:

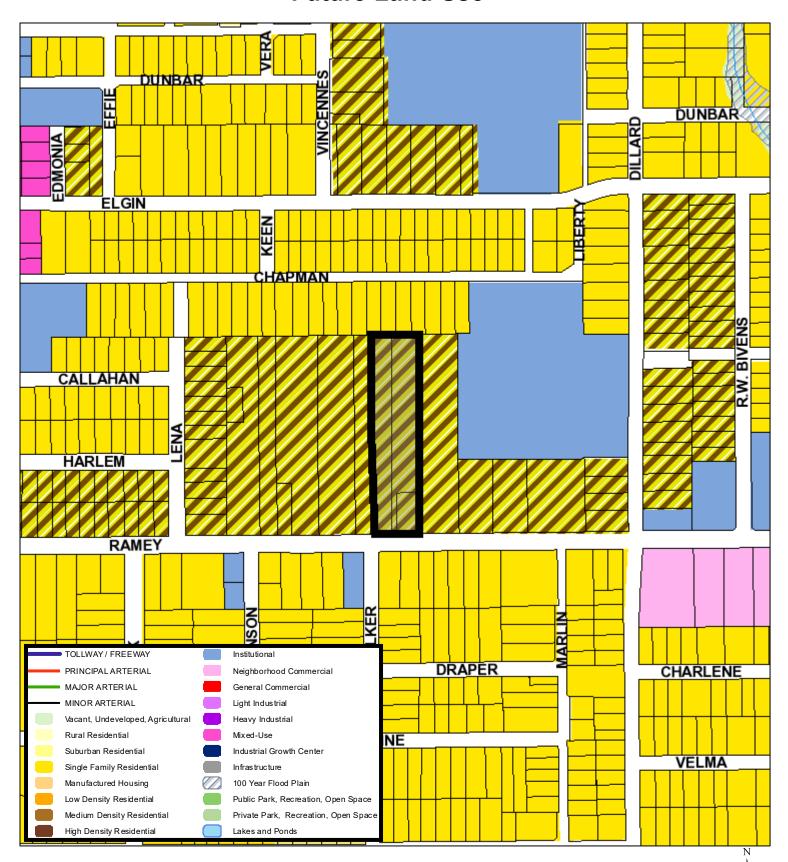
Southeast Sector/District: Commission Date: 10/8/2024 817-392-6226 Contact:





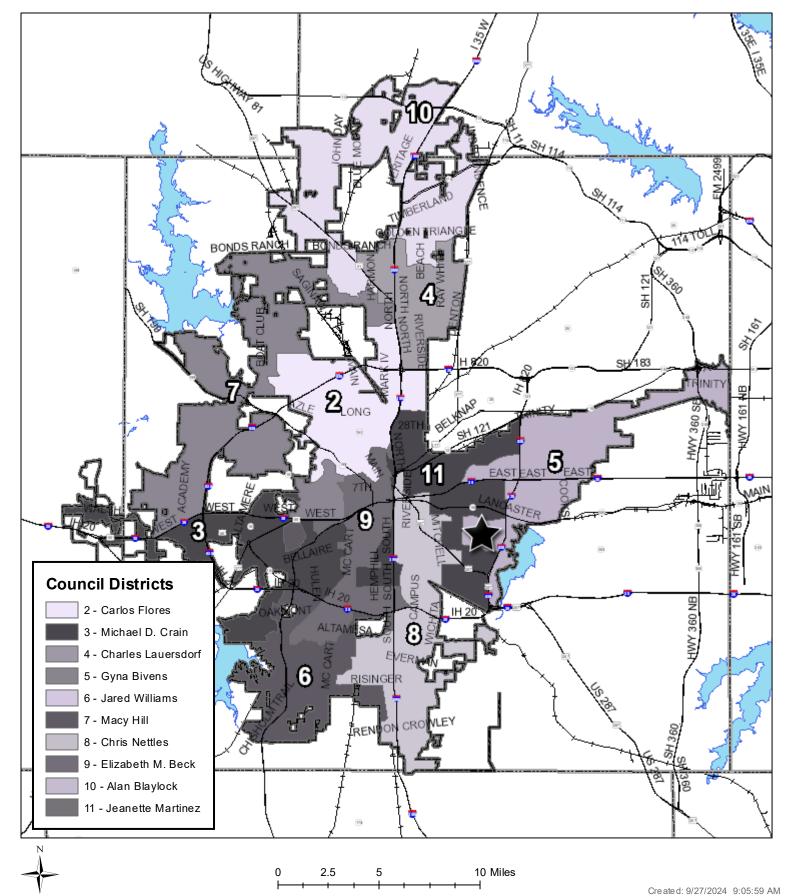


Future Land Use



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ZONING CHANGE / SITE PLAN APPLICATION

CONTACT INFORMATION

PROPERTY OWNER Cavile Public Facility Corp / I	Fort Worth Housing Authority
Mailing Address 1201 E 13th Street	City, State, Zip Fort Worth, TX 76102
PhoneEn	nail
APPLICANT Child Care Associates	
Mailing Address 3000 E Belknap	City, State, Zip Fort Worth, TX 76111
Phone 254-702-6125 En	
AGENT / OTHER CONTACT Mary Nell Poole - To	ownsite
Mailing Address 2918 Wingate, Ste 100	City, State, Zip Fort Worth, TX 76107
Phone 817-850-9500 En	nailmarynell@townsiteco.com
Note: If the property owner is a corporation, partner person signing the application is legally authorized t	rship, trust, etc., documentation must be provided to demonstrate that the to sign on behalf of the organization.
PRO	OPERTY DESCRIPTION
Site Location (Address or Block Range): 5033 Ran	ney Ave and 5105/5105 Ramey Ave
Total Rezoning Acreage: 2.82 💆 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 description or certified metes and bounds description is re	t clearly label each tract and the current and proposed zoning districts. A platted lot equired for each tract, as described below.
Is the property platted? 5033 Rame	ey Ave - Simon & Max K Mayer Subdivision Lot 9, Lot 9 Less ROW
✓ YES - PLATTED Subdivision, Block, and Lot (list all): Lot 10 Sec	ey Ave - Simon & Max K Mayer Subdivison Lot 10 Less SEC & N2 Pt 11 of Lt 10 & SWC of Lt 11
Is rezoning proposed for the entire platted area	? ☑ Yes ☐ No Total Platted Area: 2.82 acres
Any partial or non-platted tract will require a cel	rtified metes and bounds description as described below.
the surveyor's name, seal, and date. The metes metes and bounds descriptions must close. If the	nd bounds legal description is required. The boundary description shall bear and bounds must begin at a corner platted lot or intersect with a street. All he area to be rezoned is entirely encompassed by a recorded deed, a copy of metes and bounds description must be provided in Microsoft Word format.
Total Area Described by Metes and Bounds:	acres

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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).

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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 IN	IFORMATION
Current Zoning District(s): A5	posed Zoning District(s): CUP
Current Use of Property: Vacant	
Proposed Use of Property: Early Childhood Learning Center	
For Planned Developmen	t (PD) Requests Only
First, reference Ordinance Section 4.300 to ensure your project qua	alifies for PD zoning. If so, complete the following:
Base Zoning District Proposed for PD:	
and 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 applica	ation)
\Box Site Plan Required (site plan will be submitted at a future time for	
\Box Site Plan Waiver Requested (in the box above, explain why a wa	
⊐ Site Plan Walver Requested (in the box above, explain why a wa	iver is needed)
For Conditional Use Permit	: (CUP) Requests Only
Current Zoning of Property: <u>A5</u>	
Additional Use Proposed with CUP: Early Childhood Learning C	enter
Are Development Standards or Waivers being requested? ☐ Yes	□ No If yes, please list below:
Request site plan be provided as separate case once the fin	al concept plan is complete.

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

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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.

The applicant plans to develop an Early Childhood Learning Facility to expand access to infant, toddlers and 3-yr old services in Stop Six. This project was awarded American Rescue Plan Act (ARPA) funds by the City of Fort Worth to develop the project.

The current zoning on the properties is A5, and we are requesting a CUP for additional use as an early childcare facility. The properties are adjacent to a church, residential homes, vacant land and elementary school.

The applicant is requesting zoning be approved for the site and allow the site plan to be presented to Zoning Commission once the concept plan has been more fully developed.

The applicant has reached out to area stakeholders including adjacent churches, homeowners associations and Councilwoman Bivens. It is the applicants intent to work with affected stakeholders to discuss setbacks, parking, drop-off/pick-up routes, signage and other aspects of the site plan prior to coming back to Zoning Commission.

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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 <u>Fort Worth Neighborhood Database</u> includes contact information for each registered organization. To find a list of organizations in close proximity to your site, please use the <u>Online Zoning Map</u> or contact <u>Community Engagement</u> . 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
	d

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):		
	Mary-Mary-Mary-Mary-Maret Lemons (Sep 3, 2024 15:04 CDT)	
Owner's Name (Printed):	Cavile Public Facility Corp by Mary -Margaret Lemons - Secretary/Treasurer of	
	Cavile Public Facility Corporation & Presidnet of the Housing Authority of City of Fort Worth, Texas	

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) Mary Nell Poole - Townsite

ACTING ON MY
BEHALF AS THE OWNER OF THIS PROPERTY AS INDICATED AT THE 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:

5033 Ramey Ave - Simon & Max K Mayer Subdivision Lot 9, Lot 9 Less ROW
(CERTIFIED LEGAL DESCRIPTION)
5105 Ramey Ave - Simon & Max K Mayer Subdivision Lot 10 Less SEC & N2 Pt 11
Lot 10 Sec of Lt 10 & SWC of Lt 11

Χ	24.28	&
Ow	/ner's Š	ignature (of the above referenced property)

Mary Margaret Lemons-Secretary of Cavile Public Facity Corporation X and President of the Housing Authority of the City of Fort Worth, Texas

Owner's Name (Printed)

Applicant or Agent's Signature

Mary Nell Poole, Townsite

Applicant or Agent's Name (Printed):

