

#### City of Chester 100 West End Street Chester, SC 29706 Phone (803)581-2123 Fax (803)377-1116 www.chester.sc.org

#### **PLANNING COMMISSION MEETING**

Tuesday, June 27, 2017 6:00pm

Bob Smith, Chair

#### **AGENDA**

- 1. Call to Order
- 2. New Business
  - a. PC2017-02 126 York Street (old Word and Spirit Ministries)
- 3. Adjourn

# **PUBLIC NOTICE**

The City of Chester Planning Committee has scheduled a meeting on **Monday, June 27, 2017 at 6:00pm**. The meeting will be held at City Hall, 100 West End Street, Chester SC 29706.

## COUNTY/CITY REZONING APPLICATION

Pa 150

2017-02

Request: From R-10	to	
· ·	PROPERTY INFO	DRMATION
PROPERTY ADDRESS 120	b York St -	
TAX MAP # 201-03-23-010-000		PLAT: ATTACH TO APPLICATION
LOT AREA: ACRES 1.40		
CURRENT ZONING: _ R - 1	o Hist. Dist.	PROPOSED: To Amena Zoving Or To Allow Funeral Home in R
2025 LAND USE		- Tours of Holyle In 18
CURRENT USE OF PROPER	TY Word and	Spirit Ministries Church Sch
REASON FOR REZONING		
	GENERAL INFOR	RMATION
APPLICANTS NAME <u>Ram</u>	dall Chap	man
ADDRESS P.O. Boy 94	•	
	-	
WORK	НОМЕ	E CELL <sub>0</sub>
Signature of Applicant: Kanda	Magnun.	BK Solfon Donais
PROPERTY OWNERS NAME		····
ADDRESS 126 York S	treet, Ches	ster, SC 29706
PHONE		,
WORK	НОМЕ	E CELL
Signature of Owner: Se	e attache	ed authorization

### REVELANT FACTORS PERTAINING TO THE REZUNING REQUEST

1. I (we) are making application for rezoning in order to (please select):
implement the Land Use Plan correct an original mistake or manifest error in the regulations or map recognize substantial changes or changing conditions in a particular location recognize changes in technology, style of living, or matter of doing business
recognize changes in technology, style of living, or matter of doing business other to allow for a funeral home in R-10.
Please justify your reasoning: <u>Luriently not allowed in any zone-funer</u>
2. Any structures on the property: yes \( \frac{\chi}{\lambda} \) no \( \frac{\chi}{\lambda} \). If you checked yes, draw locations of structures on plat or blank paper. List what structures are.
3. Please explain how this request is consistent with the Land Use Plan: Xisting Structure to accommodate the use of a proposed funeral home. The current use is non-Residential.
nereby certify that I have read this application and the information supplied herein is true and correct to the best of my knowledge. I agree to comply with all applicable City or County redinances and state laws related to the use and development of the land. I further certify at I am the property owner, or his/her authorized agent, of the subject site(s). I understand at falsifying any information herein may result in rejection or denial of this request.
pplicants Signature Date
we) the owners designate the person signing as applicant to represent me (us) in this zoning application.
See Attached Authorization
wner's Signature Date
CANCELATION MAY RESULT IN AN ADDITIONAL FEE OF \$150.00. YOU MAY HAVE SOMEONE TO REPRESENT YOU AT THE MEETING.

Date: June 5, 2017

To: City of Chester Zoning Board

From: Pastor David Levister

Property Location: 126 York Street, Chester, SC 29706

I hereby designate Randy Chapman, Sold on Demand, Broker and or Robbie King, Realtor, Sold on Demand, permission to represent me in this rezoning process of 126 York Street, Chester, SC 29706.

Owner's Signature Date

Subscribed and swom to before me this \_\_\_\_\_\_ day of \_\_\_\_\_\_ day of \_\_\_\_\_\_\_ 2017

Betty a Duffer

My Commission Expires: August 5, 2020

## REZONING APPLICATION INSTRUCTIONS

The attached application must be filled out completely and all fees paid in full.

Application fees:

\$ 150.00 for single parcels

\$ 300 for multiple parcels

\$ 500.00 for Planned Development

A plat (survey) must be submitted before a request can be accepted.

## \*\*\*REZONINGS TO PD MUST HAVE CONCEPT/SKETCH APPROVAL BEFORE SUBMITTING APPLICATION\*\*\*\*

Please print with ink or use a typewriter to fill out forms.

The following information corresponds with the rezoning application. These instructions are provided to help applicants understand specific information needed.

**APPLICANT**: This person will represent the property owner at the public hearing. A property owner or authorized representative can also be the applicant. Fill in name, full address, and contact information.

**PROPERTY OWNER**: The person(s) listed with the tax assessor as the property owner. Fill in name, full address, and contact information.

**PROPERTY TAX MAP #:** The Tax Map Number can be found on the property tax notice or it can be obtained by calling 803-377-4177.

**PLAT SURVEY OF PROPERTY**: This can be obtained from the property owner of the Clerk of Court Office in the Chester County Courthouse. Indicate on the plat, the approximate location and distance of all structures and dwellings in relation to all property lines. If a plat does not exist a scaled drawing of the property will be accepted.

LOT AREA: Provide the size (area) of the lot. Example: 4.2 acres

**PRESENT ZONING**: Fill in the Zoning Classification(s) that are being requested in this application.

PROPOSED ZONING: Fill in the Zoning Classification(s) that are being requested.

LAND USE DESIGNATION: This information explains the Land Use Plan's recommendation for the property.

**USE OF PROPERTY:** Describe in general terms the current use of the property. Example: farming, vacant, house, convenience store, etc.

FACTORS RELEVANT TO THE REZONING REQUEST: Answer the questions in this section carefully and be specific in your answers. If more space is needed, attach a separate sheet of paper to the application.

**APPLICANT'S REASON:** Justify the reason for your request as it applies to the selection(s) made in the first question. This can include applicable limitations posed to the subject property under current zoning.

**APPLICANT'S SIGNATURE:** The applicant must sign the form certifying the information is correct. Sign even if the applicant is the owner.

**OWNERS SIGNATURE:** The property owner must sign this section. Notarized written authorization from the property owner giving the applicant permission to act of his/her behalf can be substituted for property owner's signature.

**CONSISTENCY WITH THE LAND USE PLAN:** The applicant must provide a detailed response as it applies to the request and its consistency with the Comprehensive Plan.

### ADDITIONAL REZONING INFORMATION

The application submittal deadline is thirty (30) days prior to the meeting. The Planning Commission will recommend approval or denial of the request. Planning Commission only makes recommendations to the City/County Council.

Although the rezoning will be advertised in the local newspaper, and the property posted, indicating the date and time of the public hearing, the Planning Staff strongly recommends that all neighbors and property owner be contacted personally by the applicant before the application is submitted.

The City/County Council, City/County Planning Commission, or the owner of the property can initiate a rezoning or applicant with signature approval from the property owner.

Partial lot rezoning are discouraged, however, if you are proposing a partial request, a survey is required indicating the area proposed for change. The boundary survey must meet all Subdivision and Zoning standards.

Amendment applications will not be accepted or processed when there is evidence that a zoning violation exists on or in the use of the land that is the subject of the requested change unless the rezoning approval will resolve the existing violation.

The applicant is strongly encouraged to attend the Planning Commission meeting. This process takes minimum of ninety (90) days. Written notification of City or County Council's final action will be mailed to the applicant and property owner.

A property owner cannot initiate action of a rezoning affecting the same parcel or lot, or any part thereof, for a period of twelve (12) months following denial of the rezoning request by County Council unless Council finds that there are significant changes in the petition.

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LOCATION OF PARTICE

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