

City of Arkadelphia
Board of Zoning Adjustment and
Planning Commission Meeting
May 12, 2022 at 5:30 p.m.
City Hall Boardroom, 700 Clay Street
Arkadelphia, Arkansas 71923

AGENDA

1. Call the Board of Zoning Adjustment to order.
2. Staff Report for Michael D. Cherry, Jr's requests
3. Public Hearing to consider a request by Michael D. Cherry Jr's to reverse the decision of the building official on operating a Beauty Salon in a Residential Use District at 5 Lexington Circle.
4. Adjourn Board of Zoning Adjustment
5. Call the Planning Commission to order.
6. Consider the April 14, 2022 Planning Commission minutes.
7. Building Department Report, DeAnna Graves
8. Other business
9. Adjourn Planning Commission



Building Department Manager
DeAnna Graves
700 Clay St.
Arkadelphia, AR 77923
Ph: (870) 246-1818
deanna.graves@arkadelphia.gov

Date: April 26, 2022
To: Board of Zoning Adjustment
Cc: Gary Brinkley, City Manager; City Board of Directors; and Ed McCorkle, City Attorney
From: DeAnna Graves, Building Department Manager *dg*
Re: Michael D. Cherry, Jr.'s request for an Appeals Hearing concerning denial to operate a beauty shop in a Residential District R-1.

Michael D. Cherry, Jr. requested to operate a beauty shop in a Residential Use District R-1 at 5 Lexington Circle which was denied by the Building Dept. Manager referencing the City Code of Ordinances Article 3-1 Section A.

Here listed are the uses allowed in a Residential Use District R-1 per **Article 3-1 Section A. Permitted Uses**

1. Single family dwellings, detached.
2. Public parks and playgrounds and other municipal recreational use.
3. Public schools and private schools offering similar educational courses.
4. A parking lot used to service uses permitted in the district.
5. General purpose farm, garden or nursery, provided however, that no odor or dust-producing substance or use shall be permitted within 100 feet of any property line.
6. Municipal water supply use.
7. Customary accessory uses and buildings, provided such uses are incidental to the principle use and do not include any activity **commonly conducted for gain**. Any accessory building shall be located on the same lot with the principle building.

Mr. Cherry is requesting for the Board of Zoning Adjustments to reverse the building official's decision and grant the operation of a beauty shop as a permitted use in an R-1 Residential Use District.

As required, a legal notice was published in The Southern Standard on April 28, 2022. The adjacent property owners were notified by certified mail return receipt.

Land Use Ordinance B-425, Art. 7-4, *Variance* – **Does this request meet the criteria?**

- A. *The Board shall hear requests for variance from the literal provisions of the zoning ordinance in instances where strict compliance to the provision of the ordinance would cause undue hardship due to the circumstances unique to the individual property under consideration.* – **no hardship**
- B. *The Board may grant variances only when it is demonstrated that such action will be in keeping with the spirit and intent of the zoning ordinance.* – **Variance will not be keeping with the spirit & intent of this zone.**
- C. **The Board shall not permit as a variance any use in a zone that is not permitted under this ordinance. This use is not a permitted use and would set a precedence. Note: there was another request to have a beauty salon in home on Apple Blossom**
- D. *The Board may impose conditions in the granting of the variance to insure compliance and to protect adjacent property.*

Staff is requesting the Board of Zoning Adjustment to uphold the building official's decision to deny the request.

CITY OF ARKADELPHIA
APPLICATION FOR HEARING

TO THE ARKADELPHIA BOARD OF ZONING ADJUSTMENT:

Application is hereby made to the Arkadelphia Board of Zoning Adjustment pursuant to the Arkansas laws, Act of 186 of 1957, Acts of Arkansas, as amended, requesting a hearing related to the following described property:

- 1) Please attach legal description: Druid Hills Addition lot 157
- 2) Street address or approximation thereof: 5 Lexington Circle
- 3) Title of this property is vested in Michael Dale Cherry, Jr.

Address: 5 Lexington, Arkadelphia, AR 71923

There are no deed restrictions pertaining to the variance or appeal requested herein. Any restrictions are described _____

4) The hearing is requested for the following reason:

- (X) Appeal from a decision of the City Building Official concerning his/her interpretation of the zoning regulations.

Explain: Request to operate a beauty shop in R-1 Single Family Residential District was denied due to Beauty Salons are a permitted use in R-1 Zoning District

Zoning Article # 3-1.A

- () Request for a variance from the zoning regulations due to unique characteristics of the property.

Explain: _____

Zoning Article # _____

5) A map of the subject property is enclosed herewith as a means of illustrating the problem of concern. Where applicable, the map shows (1) the approximate dimensions of property lines and adjoining rights-of-way, (2) approximate outline location of buildings with appropriate dimensions, and (3) land uses and owners' names of adjacent properties.

6) It is understood that the Notice of Public Hearing will be published at least 7 days prior to said hearing in a newspaper of general circulation in the City. A publication fee of fifty dollars (\$50.00) and a filing fee of five dollars (\$5.00) will be paid to the Building Department. Total fees \$55.00.

\$55.00 received on 4/19/22
Receipt # 8987

Check # Cash \$55.00
Rec'd by: Leatrice Thomason

- 8) It is understood by the applicant that the Board of Zoning Adjustment may request that additional notice of said public hearing be given to certain interested persons and organizations.
- 9) Submit original with attachments to the City Building Official at least **ten working days prior to hearing date**. Use Additional sheets if above spaces are inadequate.
- 10) Under penalties of perjury, I declare that I have examined this petition, including accompanying materials and statements, and to the best of my knowledge and belief, it is true, correct and complete.

Respectfully submitted,

Signature of applicant Michael Cherry

Address 5 Lexington Circle Arkadelphia AR 71923

Telephone (903) 874-6313

(Do not write below this line)

CITY OFFICIAL:

Date 4/18/2022

Filing Date 4/19/2022

Are all ten points of application in order? yes

Required number of copies mailed? _____

Time and date of public hearing 5:30 May 12, 2022

Notice published (newspaper and date) The Southern Standard 4/28/22

Copy attached? yes

Application approved by the Board of Zoning Adjustment? _____

Date: _____ Reasons: _____

Board's action was () was not () appealed to a court of record:

Date appealed _____

Court of record action on appeal _____

Signature of City Official _____

Date _____

LEGAL NOTICE

The Board of Zoning Adjustment will hold a public hearing on May 12, 2022 at 5:30 p.m. in the Town Hall Boardroom, 700 Clay Street, Arkadelphia, Arkansas to hear Michael D. Cherry, Jr's request to operate a Beauty Salon in a Residential Use District (R-1) at 5 Lexington Circle in the Druid Hills Addition. All interested parties may be heard at said time and place or may notify the Board of Zoning Adjustment by letter of their views on this matter. The application is on file for public inspection in the Building Department at 700 Clay Street. Dated this 26th day of April 2022. By: Samantha Roybal, City Clerk.

Michael Dale Cherry, Jr. – 5 Lexington Circle

Request to operate a beauty shop in R-1 Residential Use District





Building Department Manager
DeAnna Graves
700 Clay St.
Arkadelphia, AR 77923
Ph: (870) 246-1818
deanna.graves@arkadelphia.gov

April 26, 2022

Dear Property Owner:

This letter is to notify you of the request submitted by Michael D. Cherry, Jr. to operate a Beauty Salon from his house located at 5 Lexington Circle in the Druid Hills Addition. This property is located in a Residential Use District (R-1) and adjacent to property you own.

His request was denied by the building official due to Beauty Salons (Commercial Business) are not a permitted use in this residential zoning district. He is requesting the Board of Zoning Adjustment to reverse the decision and allow the operation of a Beauty Salon in an R-1 Residential Use District.

LEGAL NOTICE

The Board of Zoning Adjustment will hold a public hearing on May 12, 2022 at 5:30 p.m. in the Town Hall Boardroom, 700 Clay Street, Arkadelphia, Arkansas to hear Michael D. Cherry, Jr's request to operate a Beauty Salon in a Residential Use District (R-1) at 5 Lexington Circle in the Druid Hills Addition. All interested parties may be heard at said time and place or may notify the Board of Zoning Adjustment by letter of their views on this matter. The application is on file for public inspection in the Building Department at 700 Clay Street. Dated this 26th day of April 2022. By: Samantha Roybal, City Clerk.

Please feel free to call the Building Department for additional information.

Sincerely,

A handwritten signature in blue ink that reads 'DeAnna Graves'.

DeAnna Graves

Encl. (1)

Michael D Cherry, Jr.
for
5 Lexington Circle, Druid Hills Addition


Item 9. (3) Land uses and owners' names for all lands abutting the boundaries of the subject property

Property Address	Land Use	Owner's Name	Owner's Address
1629 Northridge Drive	Residential	Bob & Billie Murphy	1629 Northridge Drive Arkadelphia, AR 71923
1625 Northridge Drive	Residential	Betty H Rittenberry	1625 Northridge Drive Arkadelphia, AR 71923
6 Lexington Circle	Residential	Lois Mitchell Thomas	6 Lexington Circle Arkadelphia, AR 71923
10 Lexington Circle	Residential	Sarah E Strickland	10 Lexington Circle Arkadelphia, AR 71923
9 Lexington Circle	Residential	John R Morgan Becky K Morgan	9 Lexington Circle Arkadelphia, AR 71923
1633 Northridge Drive	Residential	David S Smith Whitney Smith	1633 Northridge Drive Arkadelphia, AR 71923
204 Druid Hills Road	Residential	Joshua R Culp Madison T Culp	204 Druid Hills Road Arkadelphia, AR 71923
206 Druid Hills Road	Residential	Larry Bagley Kyndel Bagley	206 Druid Hills Road Arkadelphia, AR 71923

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:
 Sarah E Strickland
 10 Lexington Circle
 Arkadelphia, AR 71923



9590 9402 5341 9154 5643 97

2. Article Number (Transfer from service label)
 7020 0640 0001 3511 4738

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON

A. Signature
 X S STRICKLAND

B. Received by (Printed Name)
 JB G C

D. Is delivery address different from the address on the mailpiece?
 If YES, enter delivery address:

3. Service Type
 Adult Signature
 Adult Signature Restricted Delivery
 Certified Mail®
 Certified Mail Restricted Delivery
 Collect on Delivery
 Collect on Delivery Restricted Delivery
 Insured Mail
 Insured Mail Restricted Delivery (over \$500)

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Arkadelphia, AR 71923

OFFICIAL USE

Certified Mail Fee	\$3.75	\$3.75
Extra Services & Fees (check box, add fee as appropriate)		\$3.05
<input checked="" type="checkbox"/> Return Receipt (hardcopy)	\$	\$3.05
<input type="checkbox"/> Return Receipt (electronic)	\$	\$0.00
<input type="checkbox"/> Certified Mail Restricted Delivery	\$	\$0.00
<input type="checkbox"/> Adult Signature Required	\$	\$0.00
<input type="checkbox"/> Adult Signature Restricted Delivery	\$	\$0.00
Postage	\$0.58	\$0.58
Total Postage and Fees	\$7.38	\$7.38

Sent To
 Sarah E Strickland
 Street and Apt. No., or PO Box No.
 10 Lexington Circle
 City, State, ZIP+4®
 Arkadelphia, AR 71923


Postmark Here
 04/29/2022

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

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- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:
 Betty H Rittenberry
 1625 Northridge Drive
 Arkadelphia, AR



9590 9402 5341 9154 5646 87

2. Article Number (Transfer from service label)
 7020 0640 0001 3511 4714

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON

A. Signature
 X B RITTENBERY

B. Received by (Printed Name)
 JB G C

D. Is delivery address different from the address on the mailpiece?
 If YES, enter delivery address:

3. Service Type
 Adult Signature
 Adult Signature Restricted Delivery
 Certified Mail®
 Certified Mail Restricted Delivery
 Collect on Delivery
 Collect on Delivery Restricted Delivery
 Insured Mail
 Insured Mail Restricted Delivery (over \$500)

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Arkadelphia, AR 71923

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Certified Mail Fee	\$3.75	\$3.75
Extra Services & Fees (check box, add fee as appropriate)		\$3.05
<input checked="" type="checkbox"/> Return Receipt (hardcopy)	\$	\$3.05
<input type="checkbox"/> Return Receipt (electronic)	\$	\$0.00
<input type="checkbox"/> Certified Mail Restricted Delivery	\$	\$0.00
<input type="checkbox"/> Adult Signature Required	\$	\$0.00
<input type="checkbox"/> Adult Signature Restricted Delivery	\$	\$0.00
Postage	\$0.58	\$0.58
Total Postage and Fees	\$7.38	\$7.38

Sent To
 Betty Rittenberry
 Street and Apt. No., or PO Box No.
 1625 Northridge Drive
 City, State, ZIP+4®
 Arkadelphia, AR 71923

Postmark Here
 04/29/2022

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- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:
 Lois Mitchell Thomas
 10 Lexington Circle
 Arkadelphia, AR 71923



9590 9402 5341 9154 5646 87

2. Article Number (Transfer from service label)
 7020 0640 0001 3511 4721

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON

A. Signature
 X L MITCHELL THOMAS

B. Received by (Printed Name)
 JB G C

D. Is delivery address different from the address on the mailpiece?
 If YES, enter delivery address:

3. Service Type
 Adult Signature
 Adult Signature Restricted Delivery
 Certified Mail®
 Certified Mail Restricted Delivery
 Collect on Delivery
 Collect on Delivery Restricted Delivery
 Insured Mail
 Insured Mail Restricted Delivery (over \$500)

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Arkadelphia, AR 71923

OFFICIAL USE

Certified Mail Fee	\$3.75	\$3.75
Extra Services & Fees (check box, add fee as appropriate)		\$3.05
<input checked="" type="checkbox"/> Return Receipt (hardcopy)	\$	\$3.05
<input type="checkbox"/> Return Receipt (electronic)	\$	\$0.00
<input type="checkbox"/> Certified Mail Restricted Delivery	\$	\$0.00
<input type="checkbox"/> Adult Signature Required	\$	\$0.00
<input type="checkbox"/> Adult Signature Restricted Delivery	\$	\$0.00
Postage	\$0.58	\$0.58
Total Postage and Fees	\$7.38	\$7.38

Sent To
 Lois Mitchell Thomas
 Street and Apt. No., or PO Box No.
 10 Lexington Circle
 City, State, ZIP+4®
 Arkadelphia, AR 71923

Postmark Here
 04/29/2022

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

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- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:
 Joshua R Culp
 Madison T Culp
 204 Druid Hills Road
 Arkadelphia, AR 71923



9590 9402 5341 9154 5644 27

2. Article Number (Transfer from service label)
 7020 0640 0001 3511 3342

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 X *J Culp*

B. Received by (Printed Name)
JB A Culp

D. Is delivery address different from item 1? If YES, enter delivery address below:

3. Service Type
- Adult Signature
 - Adult Signature Restricted Delivery
 - Certified Mail®
 - Certified Mail Restricted Delivery
 - Collect on Delivery
 - Collect on Delivery Restricted Delivery
 - Insured Mail
 - Insured Mail Restricted Delivery (over \$500)

7020 0640 0001 3511 3342

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Arkadelphia, AR 71923 OFFICIAL USE

Certified Mail Fee	\$3.75	\$3.75
Extra Services & Fees (check box, add fees as appropriate)		\$3.05
<input checked="" type="checkbox"/> Return Receipt (hardcopy)	\$	\$3.05
<input type="checkbox"/> Return Receipt (electronic)	\$	\$0.00
<input type="checkbox"/> Certified Mail Restricted Delivery	\$	\$0.00
<input type="checkbox"/> Adult Signature Required	\$	\$0.00
<input type="checkbox"/> Adult Signature Restricted Delivery	\$	\$0.00
Postage	\$0.58	\$0.58
Total Postage and Fees	\$7.38	\$7.38

0924 07

Postmark Here

04/29/2022

Sent To
Joshua R Culp
 Street and Apt. No., or PO Box No.
204 David Hills Road
 City, State, ZIP+4®
Arkadelphia, AR 71923

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:
 David S Smith
 Whitney Smith
 1633 Northridge Drive
 Arkadelphia, AR 71923



9590 9402 5341 9154 5644 10

2. Article Number (Transfer from service label)
 7020 0640 0001 3511 4752

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 X *D Smith*

B. Received by (Printed Name)
JB A Culp

C. Date of Delivery
4-30-22

D. Is delivery address different from item 1? If YES, enter delivery address below:

3. Service Type
- Adult Signature
 - Adult Signature Restricted Delivery
 - Certified Mail®
 - Certified Mail Restricted Delivery
 - Collect on Delivery
 - Collect on Delivery Restricted Delivery
 - Insured Mail
 - Insured Mail Restricted Delivery (over \$500)
 - Priority Mail Express®
 - Registered Mail™
 - Registered Mail Restricted Delivery
 - Return Receipt for Merchandise
 - Signature Confirmation™
 - Signature Confirmation Restricted Delivery

7020 0640 0001 3511 4745

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 Only

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Arkadelphia, AR 71923 OFFICIAL USE

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Extra Services & Fees (check box, add fees as appropriate)		\$3.05
<input checked="" type="checkbox"/> Return Receipt (hardcopy)	\$	\$3.05
<input type="checkbox"/> Return Receipt (electronic)	\$	\$0.00
<input type="checkbox"/> Certified Mail Restricted Delivery	\$	\$0.00
<input type="checkbox"/> Adult Signature Required	\$	\$0.00
<input type="checkbox"/> Adult Signature Restricted Delivery	\$	\$0.00
Postage	\$0.58	\$0.58
Total Postage and Fees	\$7.38	\$7.38

0924 07

Postmark Here

04/29/2022

Sent To
Smith
 PO Box No.
Northridge Drive
 City, State, ZIP+4®
Arkadelphia, AR 71923

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Domestic Return Receipt

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- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:
 John R Morgan
 Becky K Morgan
 9 Lexington Circle
 Arkadelphia, AR 71923



9590 9402 5341 9154 5644 03

2. Article Number (Transfer from service label)
 7020 0640 0001 3511 4745

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 X *J Morgan*

B. Received by (Printed Name)
JB A Culp

D. Is delivery address different from item 1? If YES, enter delivery address below:

3. Service Type
- Adult Signature
 - Adult Signature Restricted Delivery
 - Certified Mail®
 - Certified Mail Restricted Delivery
 - Collect on Delivery
 - Collect on Delivery Restricted Delivery
 - Insured Mail
 - Insured Mail Restricted Delivery (over \$500)

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Arkadelphia, AR 71923 OFFICIAL USE

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<input type="checkbox"/> Return Receipt (electronic)	\$	\$0.00
<input type="checkbox"/> Certified Mail Restricted Delivery	\$	\$0.00
<input type="checkbox"/> Adult Signature Required	\$	\$0.00
<input type="checkbox"/> Adult Signature Restricted Delivery	\$	\$0.00
Postage	\$0.58	\$0.58
Total Postage and Fees	\$7.38	\$7.38

0924 07

Postmark Here

04/29/2022

Sent To
John R Morgan
 Street and Apt. No., or PO Box No.
9 Lexington Circle
 City, State, ZIP+4®
Arkadelphia, AR 71923


PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

DI

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:
Bob and Billie Murphy
 1629 Northridge Drive
 Arkadelphia, AR 71923



9590 9402 5341 9154 5645 26

2. Article Number (Transfer from service label)
 7020 0640 0001 3511 4707

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON RECEIPT

A. Signature
 X **B MURPHY**

B. Received by (Printed Name)
JB M CA

D. Is delivery address different from the address on the mailpiece? If YES, enter delivery address

3. Service Type
 Adult Signature
 Adult Signature Restricted Delivery
 Certified Mail®
 Certified Mail Restricted Delivery
 Collect on Delivery
 Collect on Delivery Restricted Delivery
 Insured Mail
 Insured Mail Restricted Delivery (over \$500)

Domestic Return Receipt

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Arkadelphia, AR 71923

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Certified Mail Fee	\$3.75	\$3.75
Extra Services & Fees (check box, add fees as appropriate)		\$7.05
<input checked="" type="checkbox"/> Return Receipt (hardcopy)	\$ 3.05	
<input type="checkbox"/> Return Receipt (electronic)	\$ 40.00	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$ 40.00	
<input type="checkbox"/> Adult Signature Required	\$ 40.00	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$ 40.00	
Postage	\$0.58	
Total Postage and Fees	\$7.38	\$7.38

Sent To
Bob and Billie Murphy
 Street and Apt. No., or PO Box No.
1629 Northridge Drive
 City, State, ZIP+4®
Arkadelphia, AR 71923

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 Postmark Here
 04/29/2022

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

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Certified Mail Fee	\$3.75	\$3.75
Extra Services & Fees (check box, add fees as appropriate)		\$7.05
<input checked="" type="checkbox"/> Return Receipt (hardcopy)	\$ 3.05	
<input type="checkbox"/> Return Receipt (electronic)	\$ 40.00	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$ 40.00	
<input type="checkbox"/> Adult Signature Required	\$ 40.00	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$ 40.00	
Postage	\$0.58	
Total Postage and Fees	\$7.38	\$7.38

Sent To
Larry Bagley
 Street and Apt. No., or PO Box No.
206 Druid Hills Road
 City, State, ZIP+4®
Arkadelphia, AR 71923

0924 07
 Postmark Here
 04/29/2022

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

A motion was made by Lawrence Phillips, seconded by Diedra Middleton, to increase the wall signage from 112.50 to 120 square feet on the east elevation facing Robey Street.

The motion passed on a roll call vote and the vote was as follows:

Diedra Middleton	“Aye”	Lawrence Phillips	“Aye”
Llewellyn Terry	“Absent”	Gracie Neal	“Nay”
Bill Phelps	“Aye”	Terry Roberts	“Nay”
Tom Tobin	“Absent”		
Matt Johnson	“Absent”		

A motion was made by Terry Roberts, seconded by Lawrence Phillips, to increase the wall signage from 67.50 to 100 square feet on the south elevation facing Pine Street.

The motion passed on a roll call vote and the vote was as follows:

Diedra Middleton	“Aye”	Lawrence Phillips	“Aye”
Llewellyn Terry	“Absent”	Gracie Neal	“Nay”
Bill Phelps	“Aye”	Terry Roberts	“Aye”
Tom Tobin	“Absent”		
Matt Johnson	“Absent”		

A motion was made by Terry Roberts, seconded by Gracie Neal, to reduce the required fence setback on Robey Street from 15 feet to 9 feet.

The motion passed on a roll call vote and the vote was as follows:

Diedra Middleton	“Aye”	Lawrence Phillips	“Aye”
Llewellyn Terry	“Absent”	Gracie Neal	“Aye”
Bill Phelps	“Nay”	Terry Roberts	“Nay”
Tom Tobin	“Absent”		
Matt Johnson	“Absent”		

A motion was made by Terry Roberts, seconded by Gracie Neal, to reduce the required number of parking spaces from 12 to 7.

The motion passed on a roll call vote and the vote was as follows:

Diedra Middleton	“Aye”	Lawrence Phillips	“Aye”
Llewellyn Terry	“Absent”	Gracie Neal	“Aye”
Bill Phelps	“Aye”	Terry Roberts	“Aye”
Tom Tobin	“Absent”		
Matt Johnson	“Absent”		

ADJOURNMENT

A motion was made by Lawrence Phillips, seconded by Diedra Middleton to adjourn the Board of Zoning at 6:16 p.m.

CALL TO ORDER

Bill Phelps called the Planning Commission meeting to order at 6:16 p.m.

**APPROVAL OF PLANNING COMMISSION/BOARD OF ZONING
ADJUSTMENT MINUTES FROM FEBRUARY 10, 2022**

A motion was made by Lawrence Phillips, seconded by Gracie Neal, to approve the minutes from the February 10, 2022, Board of Zoning Adjustment/Planning Commission meeting.

The motion passed on a roll call vote and the vote was as follows:

Diedra Middleton	“Aye”	Lawrence Phillips	“Aye”
Llewellyn Terry	“Absent”	Gracie Neal	“Aye”
Bill Phelps	“Aye”	Terry Roberts	“Aye”
Tom Tobin	“Absent”		
Matt Johnson	“Absent”		

ADJOURNMENT

There being no further business to discuss, Diedra Middleton made the motion, seconded by Gracie Neal, to adjourn. **The motion passed unanimously, and the meeting adjourned at 6:23 p.m.**

Bill Phelps, Chairman

Samantha Roybal, Recorder

ADDITIONAL ATTENDEES

Tony Vo
Dustin Holmes

*BUILDING DEPARTMENT STAFF REPORT

May 5, 2022

DEVELOPMENT IN PROCESS:

- Tate Temple COGIC — 6 – 8 weeks to completion
- Ouachita Valley Meats – footings done, in-slab plumbing done, slab has not been poured
- OBU Apartments – 830 Hickory top out done, duct work in process Brick being laid
810 Hickory Rough in on Electrical & HVAC are done.
- 101 Cedar Cove – driveway completed. Needs final inspection
- 101 Aspen Cove - Installing siding, interior work in process
- 806 S 25th Street – needs finishing touches and HVAC installed
- Nursing Academy – projected finish date is a month out.
- Unique Barber Shop – ARDOT is getting bids on removing old structure
- Health Dept. – footings poured
- ARDOT – waiting on plans
- Siplast project – In slab plumbing & foundation done, hope to start iron work this week.
- Lucky Liquor – painting & flooring done, cooler installed.
- 2850 Twin River Dr – Needs final inspection done next week
- 214 N 25th Street – interior framing done
- Hospital – permit issued for MRI equipment to be replaced and room renovations

FUTURE PROJECTS

- Single Family Dwelling 109 Birch Cove – waiting on site plan
- 46 Stephenwood – Waiting on plans
- 29 Stephenwood – Should close this week and waiting on plans
- 1313 N 10th St – Arkadelphia Glass and Mirror (received part of the plans, need replat document signed)
- Airport FBO
- Need replat document for Pine Street Project and plans