

MPC POLICY

Any information intended for Board review must be submitted to the MPC staff **no later than 5:00 p.m. the Wednesday prior to the hearing date.**

After this date and time, the MPC staff cannot accept responsibility for relaying your information to the Board. You (or your representative) must present the information to the Board at their regularly scheduled hearing.

Any requests for deferral, withdrawal, or continuance must be submitted in writing AND presented by the applicant at the hearing.

There will be no exceptions to this policy unless approved by the Executive Director.

VARIANCES & SPECIAL EXCEPTIONS
PLEASE RETURN TO PLANNING COMMISSION OFFICE
505 TRAVIS STREET, ROOM 440 PHONE 318-673-6480
SHREVEPORT LA 71101

IMPORTANT - PLEASE NOTE:

***Applicants need to make an appointment with a planner before the deadline to go over the completed application to verify that all information is correct, as only completed applications with all of the requested information will be processed on the cut-off date. Any application not having all of the requested information by 5:00 P.M. this date will not be processed. There will be no exceptions to this requirement**

2015 DEADLINE DATES

<u>Early Filing Date</u>	<u>Late Filing Date</u>	<u>Hearing Date</u>
November 18*	November 25*	January 14, 2015
December 16*	December 23*	February 11
January 13*	January 20*	March 11
February 10*	February 17*	April 8
March 17*	March 24*	May 13
April 14*	April 21*	June 10
May 12*	May 19*	July 8
June 16*	June 23*	August 12
July 14*	July 21*	September 9
August 11*	August 18*	October 14
September 15*	September 22*	November 11
October 13*	October 20*	December 9

ALL CASES ARE SUBJECT TO APPEAL TO THE APPROPRIATE GOVERNING BODY

A \$250.00 filing fee is required by the governing bodies. The appeal period starts the day after the decision is made by the MPC and runs for 10 days.

CITY CASES: Appealed to the **City Council** - 505 Travis St., Suite 410
(4⁹¹ Floor Government Plaza) - 673-5262

PARISH CASES: Appealed to the **Caddo Parish Commission** - 505 Travis St, Suite 110
(1^{8t} Floor Government Plaza) - 226-6596

CONTACTS TO MAKE AFTER PLANNING COMMISSION AND/OR GOVERNING BODY APPROVAL

CITY CASES & PARISH CASES:

Obtain **Permits** - 505 Travis St., Suite 130
(1st Floor Government Plaza) 673-6100

Obtain **Certificates of Occupancy** 505 Travis St., Suite 130
(1^s Floor Government Plaza) 673-6442

DAY CARE CENTER - CHECK LIST

The following information is required. **Failure to provide all required information will result in your case not being heard on the next hearing date, with no exceptions.**

_____ **Application fee: PLEASE NOTE:** Per established withdrawal policy - filing fee is for processing and advertising and is **non-refundable** unless the case is withdrawn within the same week the case was filed. Ask for more details if needed.

Day Care application \$500.00 (early filing) - or - \$650.00 (late filing)

_____ **Signed "Notice To Applicant" form**

_____ **Typed and properly signed "Application" form (original & 1 copy)**

See instructions for applicant's signature at the bottom of the application page.

_____ **"Statement of Intent" form (original & 1 copy).**

_____ **Proof of ownership** (deed or tax notice).

_____ **Legal description of property** (type on application or attach separate sheet) **WARNING - it is essential that the legal description is accurate. Errors and/or omissions in description may invalidate required legal advertisement and nullify all or part of any approval.**

_____ **"Day Care Terms and Conditions" form, properly signed.**

_____ **Site plan (3 copies) drawn to an identified scale (engineers scale preferred) & no larger than 11" X 17", showing the following: WARNING - It is essential that the site plan is to scale, accurate, and shows all the information required below or your case will be delayed.**

1. Property **boundary lines with dimensions**
2. Abutting **streets** and alley rights-of-way
3. Existing and/or proposed **structures**
4. Existing and/or proposed **parking areas** - one space for each employee
5. Proposed **circular driveway - 20 linear feet for each eight children**
6. Proposed **walls and/or fences and play areas**
7. Proposed **landscaping** (see Landscaping Ordinance) **Must be a detailed plan showing size, number, location, & name of plants, trees, shrubs, etc.**

_____ **Water and Sewer availability letter:** Property not served by City of Shreveport Water & Sewer shall be required to submit a letter from the appropriate agency stating that water and/or sewer is available. For private wells or septic systems, a letter from the Caddo Health Department is required.

_____ **Property located in the Cross Lake Watershed** shall be required to submit letters from the Department of Water and Sewer and the Health Department stating that the proposed method of waste disposal has been approved by their respective offices.

**METROPOLITAN SHREVEPORT ZONING BOARD OF APPEALS
NOTICE TO APPLICANT**

THIS IS YOUR NOTICE THAT EITHER YOU OR A REPRESENTATIVE MUST ATTEND THE PUBLIC HEARING AT 1:00 PM ON: _____ (write in date found on cover page)
Failure to attend the Public Hearing may result in a delay or a denial.

The Public Hearing will be held in the **Government Plaza Chambers** which is located on the **1st Floor** of **Government Plaza**, 505 Travis Street.

OTHER IMPORTANT INFORMATION:

- ! A Zoning Board of Appeals approval is a use approval only. The applicant is still responsible for complying with all other applicable Zoning Ordinance requirements and obtaining all necessary permits and approvals from other departments or agencies. This shall include, but not be limited to the requirements of the Zoning Administrator, building permits, liquor licenses, the parish health unit, and Certificates of Occupancy.

- ! To withdraw a case after it has been filed, the signature of the property owner(s) is required.

- ! **All cases are subject to a 10-day appeal period** and are not final until the appeal period is over. Please note, this 10-day period usually falls on a weekend, and all appellants are given to 5 P.M. the following Monday to file an appeal. **In case of an appeal, the request is not final until the Governing Body has taken action** (City Council for City Cases, Parish Commission for Parish Cases). This final approval typically takes an additional 6 weeks to 2 months.

- ! **See cover page for contacts to make after approval.**

- ! Subdivision covenants are private legal agreements not monitored by governmental agencies and usually take precedence over a Zoning Board of Appeals approval. It is your obligation to find out if your request is in compliance with your subdivision covenants.

Useful information in dealing with a few of the rules and regulations of other departments
The following are illustrations only and not inclusive of all possible agency requirements.

- ! Any structure given approval for a commercial use will be required to be brought up to commercial standards, i.e., wiring, plumbing, handicapped accessibility, hard-surfaced parking, etc.
- ! The City Engineering Dept. requires all driveways and parking within the City limits to be hard surfaced. Call 673-6000 to find out what surfacing material is allowed.
- ! Caddo Parish Health Department approval is required for food sales, and for all septic tanks - 676-5222
- ! To find out if your property is in a flood plain or flood way, and the rules concerning properties in flood plains or flood ways, call City Engineering - 673-6000 or Parish Engineering - 226-6930

By signing below, I hereby declare that I have read the above Information and understand that either I or a representative will need to attend the aforementioned Public Hearing.

APPLICANT'S SIGNATURE/ACKNOWLEDGMENT

Date submitted (filled in by applicant)

Staff Use Only: Application filing date (date stamped) _____

APPLICATION: _____ CITY CASE _____ PARISH CASE

APPLICANT'S NAME: _____

PEOPLE REPRESENTED BY APPLICANT other than self or property owner (if public information).

MAILING ADDRESS FOR ALL CORRESPONDENCE:

PHONE: _____
(between 8:00 & 5:00)

ZIP CODE: _____ FAX: _____

SPECIAL EXCEPTION REQUEST:

- ___ Church Use ___ Mobile Home ___ Secondary Residential Structure ___ Lounge
- ___ Package Liquor ___ Package Beer ___ Package wine & beer ___ Tavern (beer only)
- ___ *Restaurant with Liquor & Beer sales ___ *Restaurant with Beer sales only
- * Please Note - Restaurant use requires that a minimum of 60% of total restaurant sales shall be from the sale of food with no more than 40% from the sale of alcohol and/or beer
- ___ Other _____

VARIANCE REQUEST:

- ___ Front Yard ___ Side Yard ___ Rear Yard ___ Site Area ___ Parking ___ Hours of Operation
- ___ Other _____

EXISTING ZONING: _____ **EXISTING USE:** _____

PROPOSED USE: _____

ADDRESS OF SITE: _____
General block numbers will be sufficient for undeveloped property

ASSESSORS ACCOUNT NUMBER: _____
Found on tax notice - example; 171413-057-0047-00

LEGAL DESCRIPTION: _____

NAME, ADDRESS, AND SIGNATURE OF ALL PROPERTY OWNERS: The property owner's signature is mandatory. ALL owners must sign. All property owners must sign unless one person has the power of attorney to sign for others and that power of attorney is submitted with the application. A managing partner in a corporation may sign and submit written authorization, or write "managing partner" by the signature. **If in business name or corporation, list all persons owning 5% or more. Attach separate sheet if necessary.**

Name	Name	Name
Address	Address	Address
Signature	Signature	Signature

DAY CARE CENTER STATEMENT OF INTENT

APPLICANT'S NAME _____

STATE REASON FOR APPLICATION AND NATURE OF OPERATION:

PERSON(S) OPERATING CENTER if other than applicant: _____

HOURS OF OPERATION (state your proposed hours) _____

PLEASE NOTE: To operate beyond these hours, you will need to check "Hours of Operation" under "Variance Request" on the application page.

B-1	7AM to 7PM
B-2 (within 300' of residential)	7AM to 10PM
B-2 (not within 300' of residential)	7AM to 12 midnight
B-3 hours	7AM to 12 midnight
SPI-3	7AM to 9PM

ANTICIPATED NUMBER OF CLIENTS _____ **AGE RANGE OF CLIENTS** _____

LENGTH OF CIRCULAR DRIVE (20 linear feet for every 8 children) _____

TOTAL NUMBER OF EMPLOYEES _____ **NUMBER OF PARKING SPACES PROVIDED** _____

SQUARE FEET OF PROPERTY _____ **SQUARE FEET OF STRUCTURE** _____

IS A SIGN REQUESTED? _____ **STATE SIZE OF SIGN** _____

STATE TYPE OF SIGN _____

IF THIS IS A RESIDENCE, PLEASE ANSWER THE FOLLOWING:

SQ. FT. OPERATOR'S LIVING AREA _____ **SQ. FT. DAY CARE AREA** _____

If you wish to request a waiver of any of the requirements (see terms and conditions sheet) please check the appropriate space:

_____ **Circular driveway of 20 linear feet per 8 children**

_____ **Six foot solid wood screening fence**

PLEASE STATE REASON FOR WAIVER OF REQUIREMENT _____

DAY CARE CENTER TERMS & CONDITIONS

All day care centers are required to satisfy the following conditions, unless waiver is granted by the Board of Appeals.

- 1. Compliance with all Federal or State Department of Health and Human Resource licensing or certification requirements.**
- 2. Paved one-way driveway of 12 feet width, 20 feet of length for each 8 children enrolled, to safely located landing.**
- 3. Six-foot solid wood screening fence along the rear and side property lines that adjoins a residential district.**
- 4. Signage to be approved by the Board of Appeals.**
- 5. Enrollment and hours of operation as approved by the Board.**
- 6. Development will be in general accord with the plot plan as approved by the Board.**

Upon approval of any application to be Board of Appeals, I understand that the continued operation of the day care center is subject to compliance with the above conditions and that failure to comply result in revocation of the approval.

Signature of property owner

Date

Signature of occupant

Date

Please Note: You may request a variance to the above requirements by filling out the request on the “Day Care Center Statement of Intent” page, however, the Board can not waive State or Federal requirements.

