

Planning & Building Department 6280 W 800N McCordsville, IN 46055 Phone: 317.335.3604

Email: building@mccordsville.org

PUBLIC HEARING INFORMATION

Case #: PC-22-011

<u>Title</u>: Platinum Properties' request for annexation of +/- 80 acres, located at 5401 W 700N, into the Town of McCordsville.

<u>Meeting Date</u>: this petition is currently scheduled to be heard at the August 9th Town Council meeting

*Meeting agenda and staff report will be available on the website by end of business day on the Friday preceding the applicable meeting. Go to www.mcccordsville.org and click on "Agendas & Minutes".



McCORDSVILLE PLAN COMMISSION APPLICATION for VOLUNTARY ANNEXATION

IC 36-4-3-5, AS AMENDED

Applicant Inform	ation_				
Name:		Platinu	m Properties Manage	ement Company, LLC	
Current Address:			9757 Westpoint Driv	ve, Suite 600	E
	(Number)	(Street)			
			Indianapolis, IN	V 46256	
	(City)			(State)	(Zip)
Phone No.:	317-590-	8813	E-mail Address:	prioux@platinum-	properties.com
•					
Property Owner	Information (the "owner" do	es not include tenants or	contract buyers)	
Name:		David & Cha	rles C. Snider and Jo	hn M. Gunn Irrevocab	le Trust U/A
Current Address:			5401 V	V700N	
	(Number)	(Street)			
	McCordsville, IN 46055				
	(City)			(State)	(Zip)
Phone No.:	317-407-0556	(David)	E-mail Address:	dlsnider@myninest snider100@gmail.c	ar.net (David)
	317-308-8323	(Charles)		snider100@gmail.c	om (Charles)
Notification Info	rmation (list th	ne person to wh	om all correspondence re	egarding this application sl	nould be directed)
Name:	Paul Rioux				
			9757 Westpoint Dr	rive, Suite 600	
carrette / tauress.	(Number)	(Street)	<u>'</u>		
			Indianapolis, I	N 46256	
	(City)			(State)	(Zip)
Phone No.:	317-590	-8813	E-mail Address:	prioux@platinum-	properties.com
a contract many					
Property Informa	ation				
Property Address	5401 W700N				
		(Street)			
				Administrative Officer U	se Only:
Page 1 of 3				Date Application Filed	

<u>OR</u> General Location legal description)	ገ (if no address has	been assigned, p	olease provide a street corner, subc	division lot number, or attach a
Property Size:	80 Acres	acres	sq	uare feet
Current Land Use: _	Agricultu	ral	Intended Future Land Use:	Single-Family Residential
Current Zoning:	Agricultu	ral	Intended Future Zoning: _	PUD
Annexation Reason				
Explain the reason(s	s) why the applic	cant has propo	osed this annexation:	
The Develo	oner feels that the	ere is a hetter	use that will benefit both it's o	clients' needs (homes
			venue and expanded utilities)	
			· · · · · · · · · · · · · · · · · · ·	
				3

X A legal description is attached (a legal description is re-	quired for the processing of all annexation
requests – the legal description must include all adjace	ent rights-of-way that have not previously
been annexed).	
Applicant's Signature	
The information included in and with this application is comple knowledge and belief.	etely true and correct to the best of my
(Applicant's Signature)	(Date)
Owner's Signature (the "owner" does not include tenants or contract but	uyers, use additional sheets if necessary)
I authorize the filing of this application and will allow Town sta of processing this request. Further, I will allow a public notice s property until the processing of the request is complete.	
David Snider	06-15-2022
(Owner's Signature)	(Date)
Chuck Snider	06-15-2022
(Owner's Signature)	(Date)
David Suider, Trustee John M Gunn Irrev. Trust	06-15-2022
(Owner's Signature)	(Date)



McCORDSVILLE PLAN COMMISSION REZONING / ZONING MAP AMENDMENT APPLICATION

Zoning Ordinance Section 10.06

Applicant Informa	ation				
Name:	Platinum Properties Management Company, LLC				
Current Address:	9757 Westpoint Drive, Suite 600				
	(Number)				
	Indianapolis, IN 46256				
	(City)			(State)	(Zip)
Phone No.:	317-590-8	813	E-mail Address:	prioux@platinum-pr	operties.com
Property Owner I	nformation (the "owner" do	es not include tenants oı	contract buyers)	
Name:	D	avid & Charle	es C. Snider and Joh	n M. Gunn Irrevocable	Trust U/A
Current Address:			5401 W	700N	
	(Number)	(Street)			
	McCordsville, IN 46055				
	(City)			(State)	(Zip)
Phone No.: 3	17-407-0556	(David)	E-mail Address:	dlsnider@myninesta snider100@gmail.co	r.net (David)
3	17-308-8323	(Charles)		snider100@gmail.co	m (Charles)
Notification Infor	mation (list th	e person to wh	om all correspondence re	egarding this application sh	ould be directed)
Name:			Paul Rio	ux	
Name:			ve, Suite 600		
carrent / laaress.	(Number)				
			Indianapolis, IN	l 46256	
	(City)			(State)	(Zip)
Phone No.:	317-590-8	813	E-mail Address:	prioux@platinum-p	roperties.com
Property Informa	<u>tion</u>				
Current Address:	5401 W700N				
Carrenter lauress.	(Number)	(Street)			
				Administrative Officer U	se Only:
				Existing Zoning:	
				Future Land Use:	
				Date Application Filed: _	
Page 1 of 4				Docket No.:	

Subdivision Name	e (if applicable):		
<u>OR</u> General Locat description)	ion (if no address has been assigne	d provide a street corner, subdivision lot	number, or attach a legal
Current Zoning:	Agricultural	Requested Zoning:	PUD
	n(s) why the applicant has pro	oposed this zoning change (attach	additional pages as
		etter use that will benefit both it's c	
and To	own services) and the Town (ta	ax revenue and expanded utilities).	
- '			
Rezoning / Zonin	g Map Amendment Criteria		
Plan Commission	and legislative body must pay	Ordinance establishes specific cri y reasonable regard to when cons xplain how this request will addre	idering a rezoning
Will the rezoning studies or reports		mprehensive Plan and other applic	cable, adopted planning
X YES	☐ NO		
Please Explain (at	tach additional pages as nece	essary):	
Will the rezoning structure and use	•	ling current conditions and the cha	aracter of current
X YES	□ NO		
Please Explain (at	tach additional pages as nece	essary):	

Will the rezoning result in the property being used for the <i>I</i> district is adapted?	highest and best use for which land in each
X YES NO	
Please Explain (attach additional pages as necessary):	
Will the rezoning affect <i>property values</i> throughout the Tov	wn's planning jurisdiction?
X YES NO	
Please Explain (attach additional pages as necessary):	
Will the rezoning result in <i>responsible growth and developm</i>	ment?
X YES NO	
Please Explain (attach additional pages as necessary):	
Applicant's Signature	
The information included in and with this application is conknowledge and belief.	mpletely true and correct to the best of my
(Applicant's Signature)	(Date)
Owner's Signature (the "owner" does not include tenants or contra	ict buyers)
I authorize the filing of this application and will allow Town of processing this request. Further, I will allow a public noti property until the processing of the request is complete.	
David Snider	06-15-2022
(Owner's Signature)	(Date)
Chuck Snider	06-15-2022
(Owner's Signature)	(Date)
David Snider, Trustee John M Gunn Irrev. Trust	06-15-2022

REZONING / ZONING MAP AMENDMENT - APPLICATION CHECKLIST

(McCordsville Zoning Ordinance: Section 10.06 Zoning Map Amendment/Rezoning)

The following shall be included in a Zoning Map Amendment/Rezoning Application. The applicant is responsible for contacting the Administrative Officer to identify any information that is not applicable. The applicant is also required to provide any other information requested by the Administrative Officer or his/her designee to demonstrate compliance with the requirements of the McCordsville Zoning Ordinance.

Rezo	ning / Zoning Map Amendment Application Checklist:				
X	Rezoning / Zoning Amendment Application				
	Affidavit & Consent of Property Owner(s) (if owner is someone other than applicant), 5 hard				
	copies in a recordable format plus one electronic submittal in a format acceptable to the				
	Administrative Officer				
	Copy of Deed for Property Involved, including a legal description, any covenants or commitments,				
	5 copies in a recordable format plus one electronic submittal in a format acceptable to the				
	Administrative Officer				
	Filing Fee				
	Supporting Information ¹ , 5 hard copies in a recordable format plus one electronic submittal in a				
	format acceptable to the Administrative Officer of each of the following (where appropriate)				
	X Site Plan (conceptual site plan showing all features relevant to the application)				
	$\overline{\mathrm{X}}$ Vicinity Map (showing the use and zoning of all properties within 600 feet of the property				
	subject to the rezoning request)				
	Statement of Intent				
	Fiscal Impact Study (if applicable)				
	AUTOCADD shape files (if applicable)				

¹ In the In the event that the information contained herein conflicts with the applicable requirements of the McCordsville Zoning Ordinance, as amended from time to time, the regulations of the McCordsville Zoning Ordinance shall prevail.

