



# DEVELOPMENT APPLICATION

City of Rockwall  
Planning and Zoning Department  
385 S. Goliad Street  
Rockwall, Texas 75087

STAFF USE ONLY

PLANNING & ZONING CASE NO. SP2020-030

**NOTE:** THE APPLICATION IS NOT CONSIDERED ACCEPTED BY THE CITY UNTIL THE PLANNING DIRECTOR AND CITY ENGINEER HAVE SIGNED BELOW.

DIRECTOR OF PLANNING: \_\_\_\_\_

CITY ENGINEER: \_\_\_\_\_

Please check the appropriate box below to indicate the type of development request [SELECT ONLY ONE BOX]:

### Platting Application Fees:

- Master Plat (\$100.00 + \$15.00 Acre)<sup>1</sup>
- Preliminary Plat (\$200.00 + \$15.00 Acre)<sup>1</sup>
- Final Plat (\$300.00 + \$20.00 Acre)<sup>1</sup>
- Replat (\$300.00 + \$20.00 Acre)<sup>1</sup>
- Amending or Minor Plat (\$150.00)
- Plat Reinstatement Request (\$100.00)

### Site Plan Application Fees:

- Site Plan (\$250.00 + \$20.00 Acre)<sup>1</sup>
- Amended Site Plan/Elevations/Landscaping Plan (\$100.00)

### Zoning Application Fees:

- Zoning Change (\$200.00 + \$15.00 Acre)<sup>1</sup>
- Specific Use Permit (\$200.00 + \$15.00 Acre)<sup>1</sup>
- PD Development Plans (\$200.00 + \$15.00 Acre)<sup>1</sup>

### Other Application Fees:

- Tree Removal (\$75.00)
- Variance Request (\$100.00)

### Notes:

<sup>1</sup>: In determining the fee, please use the exact acreage when multiplying by the per acre amount. For requests on less than one acre, round up to one (1) acre.

## PROPERTY INFORMATION [PLEASE PRINT]

Address **4460 Tubbs Rd. (formerly part of 3150 Horizon Rd.)**

Subdivision **4703 Presbyterian Hospital of Rockwall**

Lot

**23**

Block

**A**

General Location

## ZONING, SITE PLAN AND PLATTING INFORMATION [PLEASE PRINT]

Current Zoning **PD-9**

Current Use

**F1**

Proposed Zoning **PD-9**

Proposed Use

**F1**

Acreage **23.0864**

Lots [Current]

**1**

Lots [Proposed]

**1**

**SITE PLANS AND PLATS:** By checking this box you acknowledge that due to the passage of HB3167 the City no longer has flexibility with regard to its approval process, and failure to address any of staff's comments by the date provided on the Development Calendar will result in the denial of your case.

## OWNER/APPLICANT/AGENT INFORMATION [PLEASE PRINT/CHECK THE PRIMARY CONTACT/ORIGINAL SIGNATURES ARE REQUIRED]

Owner **Texas Health Hospital Rockwall**

Applicant

Contact Person **Jason Linscott**

Contact Person

Address **3150 Horizon Road**

Address

City, State & Zip **Rockwall, TX 75032**

City, State & Zip

Phone **469-698-1000**

Phone

E-Mail

E-Mail

## NOTARY VERIFICATION [REQUIRED]

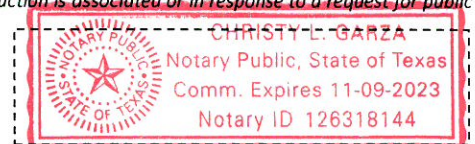
Before me, the undersigned authority, on this day personally appeared JASON LINSOTT [Owner] the undersigned, who stated the information on this application to be true and certified the following:

"I hereby certify that I am the owner for the purpose of this application; all information submitted herein is true and correct; and the application fee of \$ \_\_\_\_\_, to cover the cost of this application, has been paid to the City of Rockwall on this the 12 day of NOVEMBER, 20 20. By signing this application, I agree that the City of Rockwall (i.e. "City") is authorized and permitted to provide information contained within this application to the public. The City is also authorized and permitted to reproduce any copyrighted information submitted in conjunction with this application, if such reproduction is associated or in response to a request for public information."

Given under my hand and seal of office on this the 11 day of November, 20 20.

Owner's Signature


Notary Public in and for the State of Texas



My Commission Expires

11/9/2023



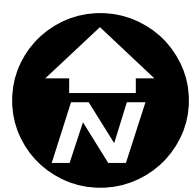
SP2020-030- AMENDED SITE PLAN FOR PRESBYTERIAN HOSPITAL  
 AMENDED SITE PLAN - LOCATION MAP = 



# City of Rockwell

Planning & Zoning Department  
 385 S. Goliad Street  
 Rockwall, Texas 75032  
 (P): (972) 771-7745  
 (W): www.rockwall.com

The City of Rockwall GIS maps are continually under development and therefore subject to change without notice. While we endeavor to provide timely and accurate information, we make no guarantees. The City of Rockwall makes no warranty, express or implied, including warranties of merchantability and fitness for a particular purpose. Use of the information is the sole responsibility of the user.



CONSULTANTS

CIVIL  
RAYMOND L. GOODSON JR., INC.  
12001 N CENTRAL EXPY SUITE 300 DALLAS, TX 75243

LANDSCAPING  
KENDALL LANDSCAPE ARCHITECTURE  
8150 N CENTRAL EXPY #701, DALLAS, TX 75208

STRUCTURAL  
LA FUESS PARTNERS  
3333 LEE PKWY #300, DALLAS, TX 75219

MEP  
SW ASSOCIATES CONSULTING ENGINEERS  
1700 PACIFIC AVENUE, STE 2100 DALLAS, TX 75201

LOW VOLTAGE  
SMITH SECKMAN REID, INC.  
3100 MCKINNON STREET, SUITE 550 DALLAS, TX 75201

FOOD SERVICE  
BOSMA DESIGN SOLUTIONS, INC.  
2201 LONG PRAIRIE RD, FLOWER MOUND, TX 75022

MEDICAL EQUIPMENT  
CALLISON RTKL, INC.  
1717 PACIFIC AVE, DALLAS, TX 75201

OWNER  
TEXAS HEALTH RESOURCES  
9300 AMBERTON PKWY, SUITE 1000, DALLAS, TX 75243

CONTRACTOR  
ROGERS-O'BRIEN CONSTRUCTION  
1901 REGAL ROW, DALLAS, TX 75235

EXTERIOR ELEVATION  
GENERAL NOTES

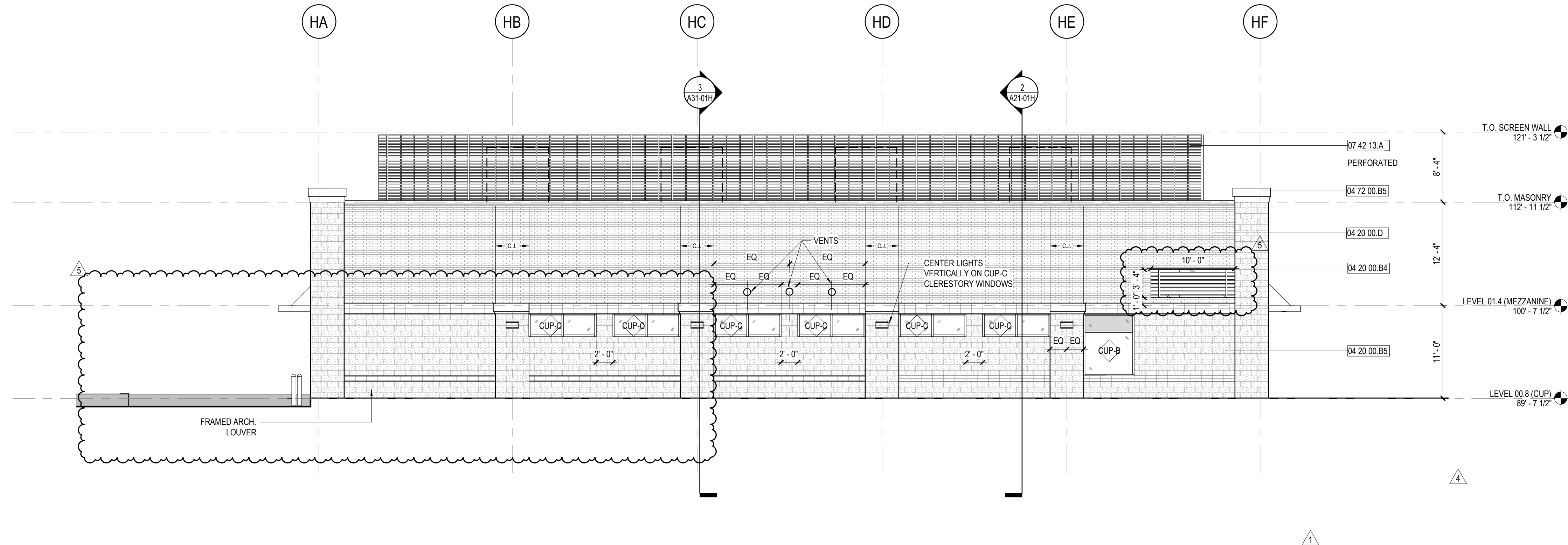
- MATERIAL SYMBOLS ON ELEVATIONS ARE TO DISPLAY THE EXTENT OF THE MATERIAL ONLY. THEY ARE NOT TO SCALE.
- PROVIDE BRICK EXPANSION JOINTS PER THE AMERICAN BRICK INSTITUTE'S RECOMMENDATIONS.

EXTERIOR ELEVATION  
LEGEND

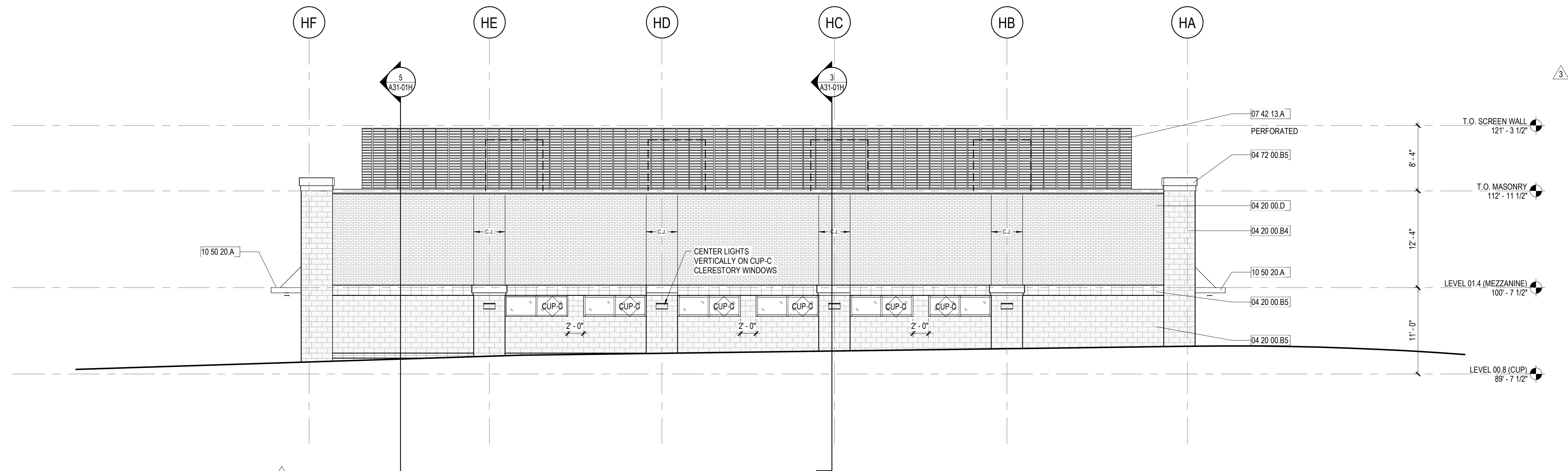
- EXTERIOR GLAZED OPENING TYPE. REFER TO GLAZING SCHEDULE.
- INTERIOR GLAZED OPENING TYPE. REFER TO GLAZING SCHEDULE.
- TEMPERED GLAZING FOR CODE.
- BUILDING EXPANSION JOINT. RE: XIAX-XX
- MASONRY EXPANSION JOINT. MATCH BRICK COLOR.

SPECIFICATION KEYNOTES

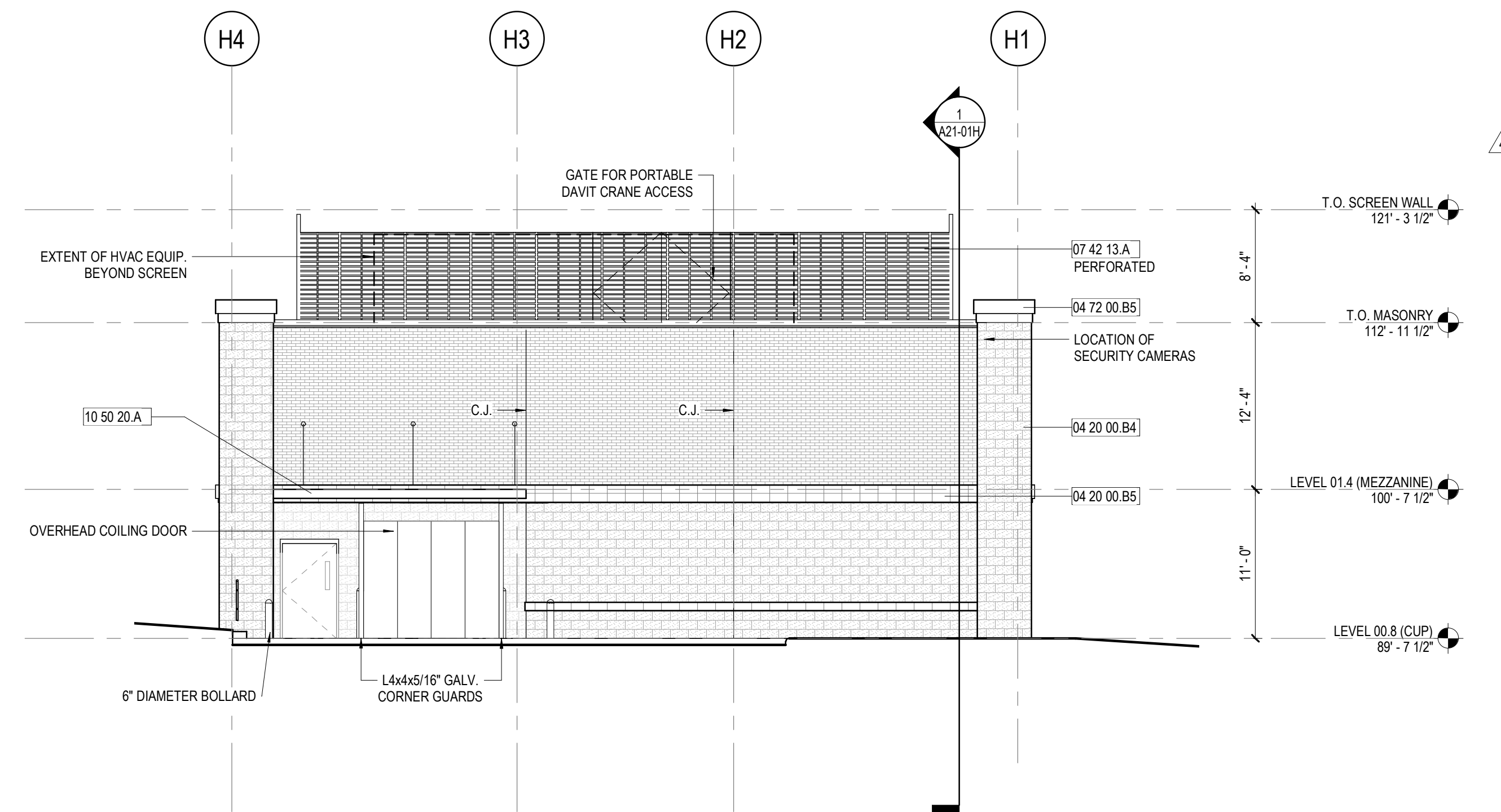
|             |  |
|-------------|--|
| 04 20 00 B4 | 8" CMU Veneer - Burnished CMU 8" X 16" |
| 04 20 00 B5 | 4" CMU Veneer - Burnished CMU 8" X 16" |
| 04 20 00 D  | Face Brick                             |
| 04 22 00 B5 | Cast Stone Coping                      |
| 07 42 13.A  | Formed Metal Wall Panel                |
| 07 71 00.A  | Coping Cap                             |
| 10 50 20.A  | Prefabricated Metal Canopies           |



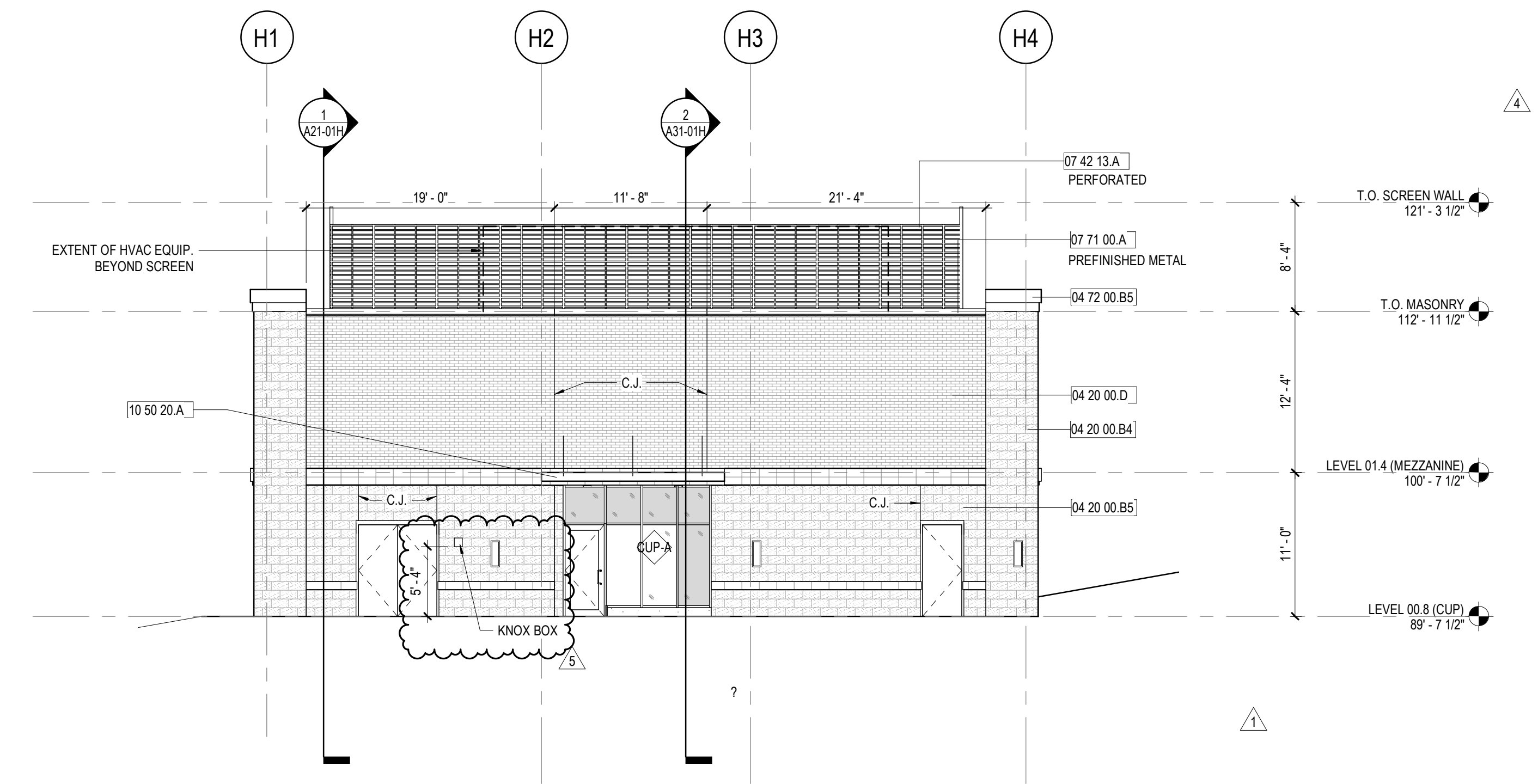
4 SOUTH ELEVATION  
1/8" = 1'-0"



3 NORTH ELEVATION  
1/8" = 1'-0"



2 WEST ELEVATION  
1/8" = 1'-0"



1 EAST ELEVATION  
1/8" = 1'-0"

DESIGN AMENDMENTS REQUESTED:

- Elimination of two louvers on the south elevation, no longer needed to serve mechanical systems.
- Addition of two windows on south elevation to match windows on north elevation.
- Relocation of mechanical louver from north elevation to south elevation.
- Change size of burnished CMU to standard modular masonry. Finish, grout, configuration and color to remain the same.

SP 2020 - 024

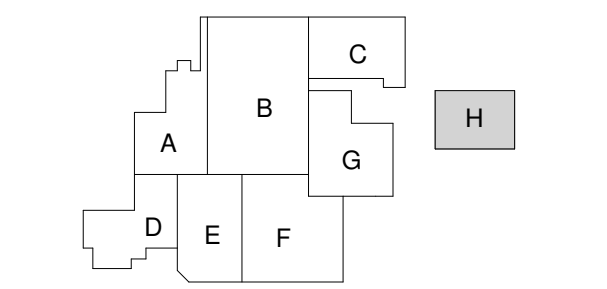
PROJECT



TEXAS HEALTH  
HOSPITAL ROCKWALL  
3150 HORIZON RD.  
ROCKWALL, TX 75032

PR 07 11/11/2020

KEYPLAN



ISSUE CHART

| MARK | ISSUE       | DATE       |
|------|-------------|------------|
| 5    | PR 06       | 11.XX.2020 |
| 4    | PR 04       | 10.05.2020 |
| 3    | PR 03       | 09.24.2020 |
| 2    | PR 02       | 08.20.2020 |
| 1    | ADDENDUM 01 | 04.02.2020 |

|            |            |
|------------|------------|
| JOB NUMBER | 147381.000 |
| DRAWN      | STB        |
| CHECKED    | DB         |
| APPROVED   | MDR        |

TITLE

EXTERIOR ELEVATIONS  
- CUP

SHEET NUMBER

A20-01H