

REQUEST FOR LEGISLATIVE ACTION

Version 6/10/19

Completed by County Counselor's Office:







Res Ord No.: 5244

Sponsor(s): xxxxxxxxx

Date: July 29, 2019

LEGISLATIVE OFFICE

JUL 22 2019

<p>SUBJECT</p>	<p>Action Requested <input type="checkbox"/> Resolution <input checked="" type="checkbox"/> Ordinance</p> <p>Project/Title: <u>Conditional Use Permit – Doris Collier Care Home, Inc CU-2019-231</u></p>										
<p>BUDGET INFORMATION <i>To be completed By Requesting Department and Finance</i></p>	<table border="1"> <tr> <td>Amount authorized by this legislation this fiscal year:</td> <td>\$</td> </tr> <tr> <td>Amount previously authorized this fiscal year:</td> <td></td> </tr> <tr> <td>Total amount authorized after this legislative action:</td> <td>\$</td> </tr> <tr> <td>Amount budgeted for this item * (including transfers):</td> <td>\$</td> </tr> <tr> <td>Source of funding (name of fund) and account code number:</td> <td>\$</td> </tr> </table> <p>* If account includes additional funds for other expenses, total budgeted in the account is: \$</p> <p>OTHER FINANCIAL INFORMATION:</p> <p><input checked="" type="checkbox"/> No budget impact (no fiscal note required) <input type="checkbox"/> Term and Supply Contract (funds approved in the annual budget); estimated value and use of contract: Department: _____ Estimated Use: _____</p> <p>Prior Year Budget (if applicable): _____ Prior Year Actual Amount Spent (if applicable): _____</p>	Amount authorized by this legislation this fiscal year:	\$	Amount previously authorized this fiscal year:		Total amount authorized after this legislative action:	\$	Amount budgeted for this item * (including transfers):	\$	Source of funding (name of fund) and account code number:	\$
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Amount budgeted for this item * (including transfers):	\$										
Source of funding (name of fund) and account code number:	\$										
<p>PRIOR LEGISLATION</p>	<p>Prior ordinances and (date): _____ Prior resolutions and (date): _____</p>										
<p>CONTACT INFORMATION</p>	<p>RLA drafted by: RLA drafted by Randy Diehl, Administrator, Development Division, 881-4577</p>										
<p>REQUEST SUMMARY</p>	<p>Requesting the renewal of a Conditional Use Permit for a period of 20 years to continue operating an adult group quarters (boarding home) on 2.00 ± acres in District AG (Agricultural). The location is 3001 NW Vesper Street, in Jackson County, Missouri, and specifically described on Attachment to RLA-1.</p> <p>The Jackson County Plan Commission on July 18, 2019 held a public hearing and accepted testimony pertaining to the Conditional Use Permit. This request conforms to the general intent and purpose of the Unified Development Code.</p> <p>Therefore, the Plan Commission voted 6 to 0 to recommend <u>APPROVAL</u> for a 20 year period provided the following conditions are met (see attachment RLA-2)</p>										
<p>CLEARANCE</p>	<p><input type="checkbox"/> Tax Clearance Completed (Purchasing & Department) <input type="checkbox"/> Business License Verified (Purchasing & Department) <input type="checkbox"/> Chapter 6 Compliance - Affirmative Action/Prevailing Wage (County Auditor's Office)</p>										
<p>COMPLIANCE</p>	<p><input type="checkbox"/> MBE Goals <input type="checkbox"/> WBE Goals <input type="checkbox"/> VBE Goals</p>										
<p>ATTACHMENTS</p>											
<p>REVIEW</p>	<table border="1"> <tr> <td>Department Director: Brian D. Gaddie, P.E. Director of Public Works</td> <td>Date: 7-22-19</td> </tr> <tr> <td>Finance (Budget Approval): <i>If applicable</i></td> <td>Date:</td> </tr> <tr> <td>Division Manager: </td> <td>Date: 7-23-19</td> </tr> <tr> <td>County Counselor's Office: </td> <td>Date: 7/25/19</td> </tr> </table>	Department Director: Brian D. Gaddie, P.E. Director of Public Works	Date: 7-22-19	Finance (Budget Approval): <i>If applicable</i>	Date:	Division Manager: 	Date: 7-23-19	County Counselor's Office: 	Date: 7/25/19		
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Division Manager: 	Date: 7-23-19										
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Fiscal Information (to be verified by Budget Office in Finance Department)

- This expenditure was included in the annual budget.
- Funds for this were encumbered from the _____ Fund in _____.
- There is a balance otherwise unencumbered to the credit of the appropriation to which the expenditure is chargeable and there is a cash balance otherwise unencumbered in the treasury to the credit of the fund from which payment is to be made each sufficient to provide for the obligation herein authorized.
- Funds sufficient for this expenditure will be/were appropriated by Ordinance # _____
- Funds sufficient for this appropriation are available from the source indicated below.

Account Number:	Account Title:	Amount Not to Exceed:

- This award is made on a need basis and does not obligate Jackson County to pay any specific amount. The availability of funds for specific purchases will, of necessity, be determined as each using agency places its order.
- This legislative action does not impact the County financially and does not require Finance/Budget approval.

RE: CU-2019-231

Randy Diehl gave the staff report:

Applicant: Doris Collier

Applicant / Property Owners: Doris Collier d/b/a
Collier Care Home, Inc.

Area: 2.00 ± acres

Request: A conditional use permit for a period of 20 years to continue operating adult group quarters (adult boarding home).

Zoning Classification: District AG (Agricultural)

Current Land Use and Zoning in Area:

Zoning in the surrounding area is primarily agricultural. Land use is large acreage tracts containing single family residences.

Comments:

This is the third renewal for a Conditional Use Permit for this facility.

County Plan:

The County Plan Development Diagram illustrates this area within the Urban Development Tier. Full urban services are required for development in the UDT, including approved public water and wastewater systems. The residence is connected to Blue Springs water and public sewer.

The preceding Conditional Use Permit was approved by the County Legislature in Ordinance 4100 on May 4, 2009. The CUP was approved for 10 years subject to the following conditions:

1. The adult group quarter (boarding home) is limited to fifteen assisted residents.
2. The applicant complies with the state of Missouri Department of Mental Health and Division of Aging.
3. Upon renewal of the required state licenses, the applicant shall forward a copy to the Public Works Development Division.

The facility has been in operation for nearly 50 years.

The facility has been continuously licensed by the State of Missouri.

The facility has a program license with the state Department of Mental Health to care and treat individuals who are mentally ill, mentally disordered, or developmentally disabled.

Staff contacted the state inspector for the facility and confirmed that licenses are current and there are no outstanding violations or issues

Mrs. Doris Collier is the facility administrator and lives in a duplex residence north of the facility. The Collier's daughter, Janice, is the General Manager of the facility and resides in the facility.

Recommendation:

Staff recommends APPROVAL of CU-2019-231 for a period of twenty (20) years subject to the following conditions:

- 1) The adult group quarter (boarding home) is limited to fifteen assisted residents.
- 2) The applicant shall comply with all rules and regulations of the state of Missouri Department of Health and Senior Services and Department of Mental Health.
- 3) Upon renewal of the required state licenses, the applicant shall forward a copy to the Department of Public Works – Development Division.

Respectfully submitted,

Jackson County Public Works
Development Division
Randy Diehl, Administrator

Mr. Tarpley: Are there any questions for Randy?

Mr. Tarpley: Can you show me on the map again where this is at?

Mr. Diehl: West of Woods Chapel Road on Vesper Street.

Mr. Tarpley: Is the applicant here?

Doris Collier, 3001 NW Vesper Street

Mr. Tarpley: Do you have anything to add to the report?

Ms. Collier: We've been taking care of people for 50 years.

Mr. Tarpley: Is there anyone else who is in favor of this application?

Mr. Tarpley: *Is there anyone who is opposed or has questions regarding this application?*

Harvey House, 32901 Hammond Road. I'm a land lord who owns three duplexes that back up MS. Collier's property. The back of this property is quite an eye-sore. They have hauled in several storage buildings, there's a truck camper that hasn't been moved in 20 years. There are bar b que grills, piles of weeds. In looking at the map this area is behind the home.

Mr. Diehl: (pointing on map) Is this the parcel you are referring to?

Mr. House: Yes

Mr. Diehl: This particular parcel, owned by the applicant, is inside the boundaries of the City of Blue Springs.

Mr. House: So I need to contact Blue Springs bout that?

Mr. Diehl: That would be correct.

Mr. House: I have had some complaints from some of my tenants stating that some of her patients are cutting through their yards to Mill Street to go to the convenience store. I not opposed to the group home; I just wish you would clean up your property.

Mr. Crawford: Mr. House could you show us on the map where your duplexes are.

Mr. House indicates on the map the properties.

Mr. Crawford: What's back there, I know that it isn't part of the Conditional Use. In a way it might be, if it's part of the business.

Mr. Diehl: The area highlighted (in blue) on the exhibit map corresponds to the legal description for the CUP.

Mr. Haley: So, we have no say?

Mr. Diehl: It's inside Blue Springs.

Ms. Mershon: So basically, everything around it is Blue Springs?

Mr. Diehl: Yes, they shaded area on the map is the City.

Mr. Crawford: The applicant lives on the other lot (to the east)?

Mr. Diehl: No. She lives here (indicating on map. Applicant lives in a duplex in Blue Springs, north of the property Mr. House was talking about).

Mr. Tarpley: Would the applicant like to respond?

Ms. Collier: People in these duplexes are throwing things onto the vacant lot.

Mr. Crawford: I have a question for staff. Has staff been inside the group home?

Mr. Diehl: No. The State has jurisdiction on any matters of how the home in run and kept.

Ms. Mershon: Why is this not inside the City, if it's surrounded by the City.

Mr. Diehl: The owners around this property have voluntarily annexed into the City

Jay Haden: The annexation laws as they apply to Jackson County gives the property owners veto over (involuntary) annexation. Elsewhere in the State, you can be annexed by a super majority vote of the people in the area to annexed. In Jackson County those living in the area to be annexed have to vote in favor of annexation. Blue Springs have the greatest number of unincorporated islands within their boundaries.

Mr. Tarpley: Can the Legislature make any kind of recommendation to the City to clean up the area.

Mr. Haden: That is something that the Legislature wouldn't get involved in.

Motion to take under advisement.

Ms. Mershon moved to take under advisement. Mr. Haley seconded.

Discussion under advisement

Ms. Mershon moved to approve. Mr. Haley seconded.

Ms. Mershon	Approve
Mr. Crawford	Approve
Mr. Haley	Approve
Mr. Gibler	Approve
Ms. Querry	Approve
Chairman Tarpley	Approve

Motion Carried 6 – 0

STAFF REPORT

PLAN COMMISSION
July 18, 2019

RE: CU-2019-231

Applicant: Doris Collier

**Applicant / Property Owners: Doris Collier d/b/a
Collier Care Home, Inc.**

Area: 2.00 ± acres

Request: A conditional use permit for a period of 20 years to continue operating adult group quarters (adult boarding home).

Zoning Classification: District AG (Agricultural)

Current Land Use and Zoning in Area:

Zoning in the surrounding area is primarily agricultural. Land use is large acreage tracts containing single family residences.

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Staff contacted the state inspector for the facility and confirmed that licenses are current and there are no outstanding violations or issues.

Mrs. Doris Collier is the facility administrator and lives in a duplex residence north of the facility. The Collier's daughter, Janice, is the General Manager of the facility and resides in the facility.

Recommendation:

Staff recommends APPROVAL of CU-2019-231 for a period of ~~ten~~ (20) years subject to the following conditions:

- 1) The adult group quarter (boarding home) is limited to fifteen assisted residents.
- 2) The applicant shall comply with all rules and regulations of the state of Missouri Department of Health and Senior Services and Department of Mental Health.
- 3) Upon renewal of the required state licenses, the applicant shall forward a copy to the Department of Public Works – Development Division.

Respectfully submitted,

Jackson County Public Works
Development Division
Randy Diehl, Administrator



JACKSON COUNTY
Public Works Department

Jackson County Technology Center
303 West Walnut Street
Independence, Missouri 64050
jacksongov.org

(816) 881-4530
Fax: (816) 881-4448

July 3, 2019

RE: Public Hearing: CU-2019-231
Doris Collier/Collier Care Home. Inc

Dear Property Owner:

You are hereby invited to participate in a public hearing to be held by the Jackson County Plan Commission on a request by Doris Collier/Collier Care Home. Inc for the renewal of a Conditional Use Permit for a period of 20 years to continue operating an adult group quarters (boarding home) on 2.00 ± acres in District AG (Agricultural). The location is 3001 NW Vesper Street.

You are being notified pursuant to 24003.5 Chapter 240 (Unified Development Code) of the Jackson County Code, as being an adjacent property within 185 feet of the subject property.

The public hearing on this matter will be held by the Plan Commission on Thursday, July 18, 2019 at 8:30 a.m. in the Large Conference Room, 2nd Floor, Historic Truman Courthouse, 112 W. Lexington, Independence, MO.

If you know of any interested party who may not have received a copy of this letter, it would be appreciated if you would inform them of the time and place of the hearing.

If you have any questions concerning this matter, please contact the Development Division at 881-4649.

Sincerely,

A handwritten signature in blue ink, appearing to read "Randy Diehl", is written over a faint, larger blue signature.

Jackson County Public Works
Development Division
Randy Diehl, Administrator

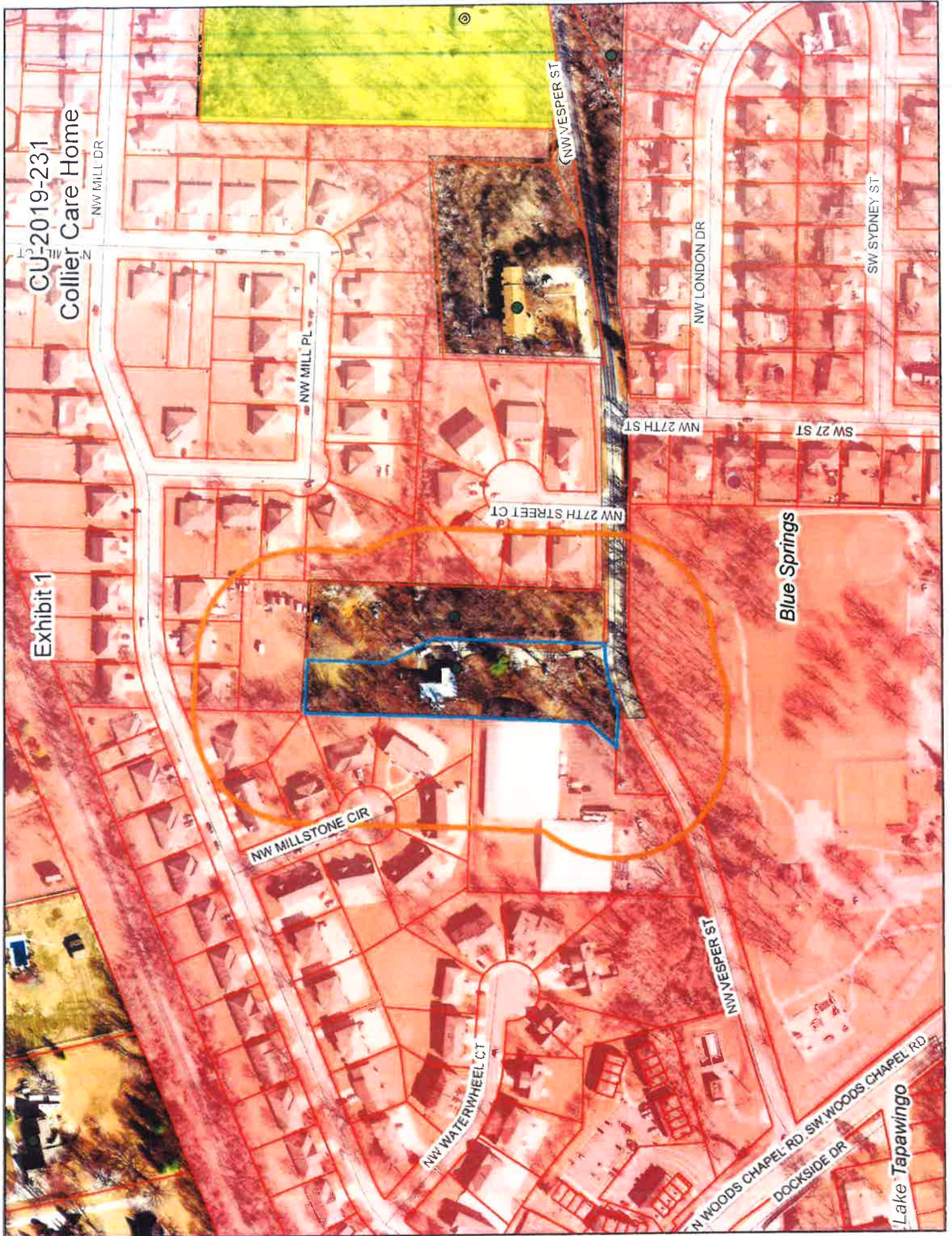
Frank White, Jr., County Executive

Plan Commission July 18, 2019

CU-2019-231

Property Owners Within 185 feet

Parcel	owner	address	city	state	zip
35-810-12-34-00-0-00-000	ADLER RONALD I & JOAN A	463 N SIDLEE ST	THOUSAND OAKS	CA	91360
35-810-07-03-00-0-00-000	CITY OF BLUE SPRINGS	903 MAIN	BLUE SPRINGS	MO	64015
35-810-02-04-00-0-00-000	CITY OF BLUE SPRINGS	903 MAIN ST	BLUE SPRINGS	MO	64015
35-810-12-36-00-0-00-000	DAVIS JEFFERSON P & KIMBERLY F	PO BOX 89	GRAIN VALLEY	MO	64029
35-810-02-66-00-0-00-000	HANES RUBY I	3166 MILL DR	BLUE SPRINGS	MO	64015
35-810-02-62-00-0-00-000	HOUSE & RENNER PROPERTIES INC	220 NW R D MIZE RD STE B202	BLUE SPRINGS	MO	64014
35-810-12-02-00-0-00-000	HOUSE & RENNER PROPERTIES INC	220 NW R D MIZE RD STE B202	BLUE SPRINGS	MO	64014
35-810-12-13-00-0-00-000	HOUSE & RENNER PROPERTIES INC	220 NW R D MIZE RD STE B202	BLUE SPRINGS	MO	64014
35-810-12-01-00-0-00-000	HOUSE & RENNER PROPERTIES INC	220 NW R D MIZE RD STE B202	BLUE SPRINGS	MO	64014
35-810-12-35-00-0-00-000	KOEHN DWIGHT E & DORIS L-TRUSTEES	347 GREAT SWAMP RD	GLASTONBURY	CT	06033
35-810-12-15-00-0-00-000	LINDSAY DANIEL F JR & TERRI L	2902 S SLAUGHTER RD	GRAIN VALLEY	MO	64029
35-810-02-63-00-0-00-000	LURAA'S ERICK	346 NW MILLSTONE CIR	BLUE SPRINGS	MO	64015-3263
35-810-02-08-00-0-00-000	METRO EAST TENNIS CENTER LLC	3109 NW VESPER ST	BLUE SPRINGS	MO	64015
35-810-12-14-00-0-00-000	NORAHS INC	30706 E LONE JACK LEES SUMMIT	RI LEES SUMMIT	MO	64086
35-810-12-37-00-0-00-000	OLD MILL PARK HOMEOWNERS ASSOC	PO BOX 99	GRAIN VALLEY	MO	64029
35-810-02-65-00-0-00-000	SALINS ARTURS E	907 SE WILLOW PL	BLUE SPRINGS	MO	64014
35-810-02-64-00-0-00-000	WOHLFORD KIM P & KATHLEEN J	412 NW CIRCLE	BLUE SPRINGS	MO	64015
35-810-02-61-00-0-00-000	WOODS JONATHAN & REBEKAH	2161 SATICOY ST	POMONA	CA	91767
35-810-12-06-00-0-00-000	COLLIER DORIS P	3001 NW VESPER ST	BLUE SPRINGS	MO	64015
35-810-12-05-00-0-00-000	COLLIER DORIS P	3001 NW VESPER ST	BLUE SPRINGS	MO	64015
35-810-12-03-00-0-00-000	DUNWIDDIE TONI & LUETJEN TERRI-TR	3001 NW VESPER ST	BLUE SPRINGS	MO	64015



CU-2019-231
Collier Care Home

Exhibit 1

Blue Springs

Lake Tapawingo

NW MILL DR

NW MILL PL

NW MILLSTONE CIR

NW WATERWHEEL CT

NW VESPER ST

NW LONDON DR

NW VESPER ST

SW SYDNEY ST

N WOODS CHAPEL RD.
DOCKSIDE DR

NW 27TH ST

SW 27 ST

NW 27TH STREET CT

**JACKSON COUNTY, MISSOURI
CONDITIONAL USE PERMIT APPLICATION**

APPLICANT INFORMATION:

1. Application must be filed with the Jackson County Development Division, 303 W. Walnut, Independence, MO 64050 by the deadline on the Plan Commission Calendar.
 2. Application must be typed or printed in a legible manner.
 3. A scaled map of the property, correlating with the legal description, and clearly showing the property's location must accompany application. Refer to Section 24003.22, pertaining to Site Plan Review within the Unified Development Code.
 4. All applicable sections must be completed. If you need more space to provide information, please use separate 8 1/2"x11" paper, reference the application number and attach it to the application. Incomplete applications will not be accepted and will be returned to the applicant.
 5. The filing fee \$350.00 (non-refundable) must accompany application.
(Check payable to: Manager of Finance)
-

TO BE COMPLETED BY OFFICE PERSONNEL ONLY:

Conditional Use Permit Number _____ CU- _____
Date filed _____ Date of hearing _____
Date advertised _____ Date property owners notified _____
Date signs posted _____
Hearings: Heard by _____ Date _____ Decision _____
 Heard by _____ Date _____ Decision _____
 Heard by _____ Date _____ Decision _____

BEGIN APPLICATION HERE:

1. Data on Applicant(s) and Owner(s):
 - a. Applicant(s) Name: Doris P. Collier / Jan Stumfoll
Address: 3001 N.W. Vesper St
Blue Springs, MO 64015
Phone: 816-806-8071 816-225-9317
 - b. Owner(s) Name: Doris P. Collier / Jan Stumfoll
Address: 3001 NW Vesper St. Blue Springs MO
Phone: _____
 - c. Agent(s) Name: _____

Address: _____

Phone: _____

d. Applicant's interest in Property: owner/operator

2. A CONDITIONAL USE PERMIT IS HEREBY REQUESTED for the following described use: Residential Care Facility II for a period of 20 years; property described as follows: a tract of land _____ square feet/acres in size located at _____ Road.

Present Zoning District _____

3. Legal Description of Property: (Write Below or Attached)

please see attached deed

4. Present Use of Property: Residential Care Facility II

5. Proposed Use of Property: Residential Care Facility II

6. Estimated Time Schedule for Development: N/A

7. What effect will your proposed development have on the surrounding properties?

No effect at all since we have been in operation since 1981.

8. Is any portion of the property within the established flood plain as shown on the FEMA Flood Boundary Map? NO

If so, will any improvements be made to the property which will increase or decrease the elevation? None

9. Describe the source/method which provides the following services, and what effect the development will have on same:

a. Water Blue Springs Utilities

b. Sewage disposal Blue Springs Utilities

c. Electricity KCPL

d. Heating Spire

e. Fire and Police protection Fire - Blue Springs Police - Jackson County

10. Describe existing road width and condition: Good condition / two lane traffic No sidewalk & no curb

11. What effect will proposed development have on existing road and traffic conditions? No effect.

12. Are any state, federal, or other public agencies approvals or permits required for the proposed development? 2 existing licenses. See attached

If so, describe giving dates of application and status (include permit numbers and copies of same, if issued): Done and renewed yearly

Verification: I (We) hereby certify that all of the foregoing statements contained in any papers and/or plans submitted herewith are true to the best of my (our) knowledge and belief.

Signature

Property Owner(s)

Lois P. Selles

Date

June 1-2019

Applicant(s):

Lois P. Selles
Janice R. Huntz-Stumpfull

June 1-2019

Contract Purchaser(s):

~~_____~~

~~_____~~

STATE OF Missouri
COUNTY OF Jackson

On this 1st day of June, in the year of 2019, before me
the undersigned notary public, personally appeared _____

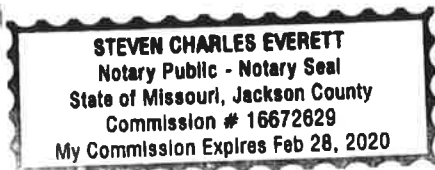
known to me to be the person(s) whose names(s) is/are subscribed to the within instrument and
acknowledged that he/she/they executed the same for the purposes therein contained.

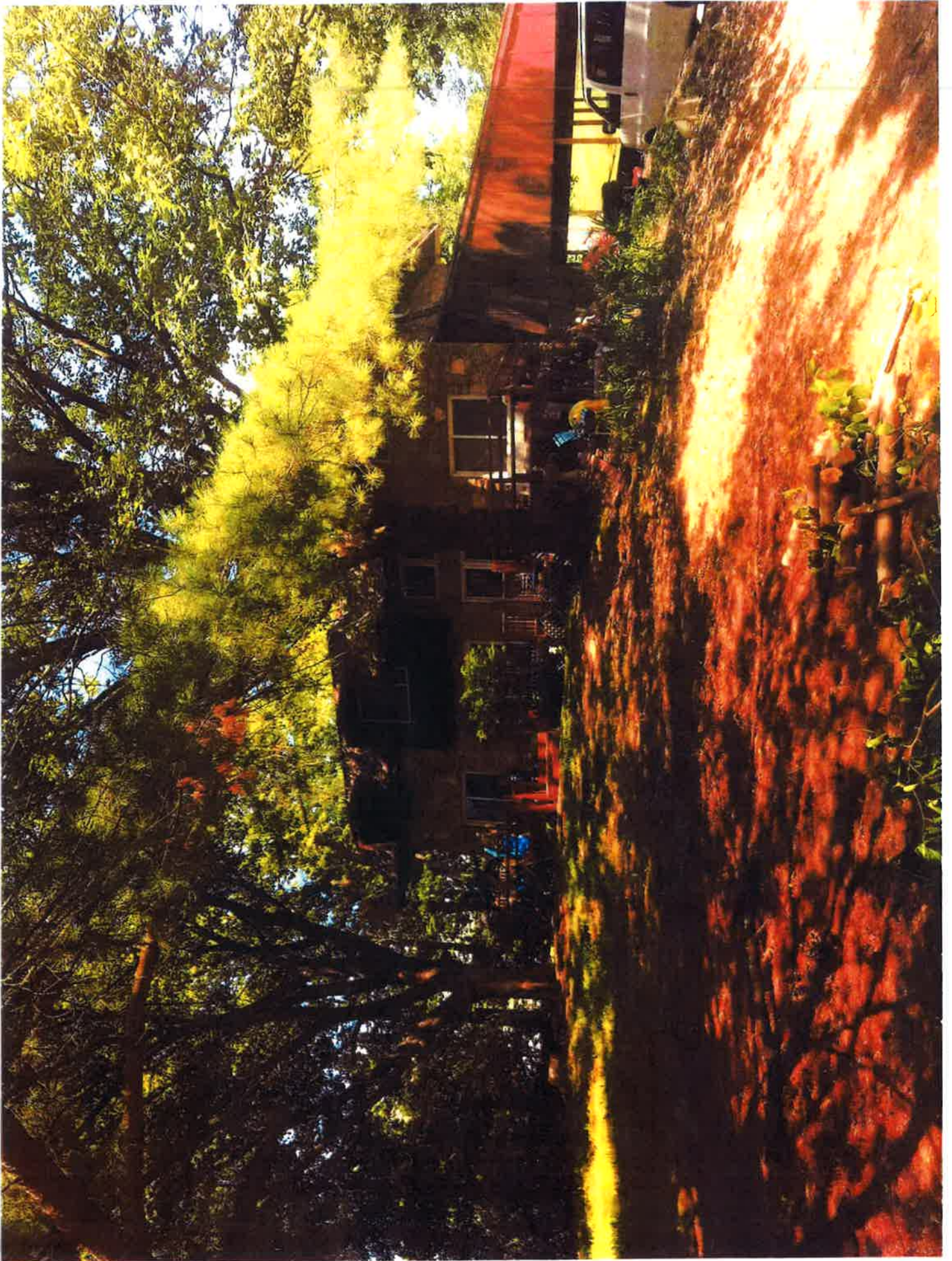
In witness whereof, I hereunto set my hand and official seal.

Notary Public

[Signature]

Commission Expires 07-28-2020





State of Missouri



*Department of Health and Senior Services
Division of Regulation and Licensure
License*

COLLIER CARE HOME, INC

Operator

Is Hereby Granted this License to Operate A / An

Residential Care Facility*

Pursuant to Chapter 198 RSMo

COLLIER CARE HOME, INC

Name of Facility

3001 NW VESPER ST, BLUE SPRINGS, MISSOURI 64015-3104

Location

TYPE OF LICENSE: **RELICENSURE**

MAXIMUM BED CAPACITY: **15**

LICENSE NUMBER **047108**

EFFECTIVE DATE **01/01/2019**

EXPIRATION DATE **12/31/2020**

Shelly Williamson

*Licensed as a residential care facility II on August 27, 2006 and chooses to continue to meet all laws, rules, and regulations that were in place on August 27, 2006 for a residential care facility II. (Section 198.073.3 RSMo, as amended by S.B. 616 (99th General Assembly, Second Regular Session (2006)).

SHELLY WILLIAMSON, ADMINISTRATOR
SECTION FOR LONG TERM CARE REGULATION



State of Missouri
Department of Mental Health
Program License

THIS IS TO CERTIFY THAT Collier Care Home, Inc.

meets licensing rules of the Department of Mental Health relative to admission criteria and care, treatment, habilitation or rehabilitation of persons who are mentally ill, mentally disordered, or developmentally disabled.

The Department issues this program license for the premises at 3001 Northwest Vesper Street, Blue Springs, MO 64015.

This facility is licensed by the Department of Health and Senior Services as a Residential Care Facility.

This program license becomes null and void if the residential facility fails to maintain a current license, temporary operating permit, or probationary license from the Department of Health and Senior Services under Chapter 198.000 through 198.096 RSMo.

The Department of Mental Health may revoke this program license or deny any application for any future program license if the Department finds a substantial failure to comply with the requirements for program license as set forth in the rules.

License No.: **WL-0011-0619**

Issuance Date: **July 1, 2019**

Expiration Date: **June 30, 2020**

Melissa Jones, Director
Office of Licensure and Certification

THIS LICENSE MUST BE POSTED IN A CONSPICUOUS PLACE ON THE PREMISES

CU-2019-231

ATTACHMENT TO RLA-2

Conditional Use Permit for a period of 20 (twenty) years with the following Conditions:

- 1) The adult group quarter (boarding home) is limited to fifteen assisted residents.
- 2) The applicant shall comply with all rules and regulations of the state of Missouri Department of Health and Senior Services and Department of Mental Health.
- 3) Upon renewal of the required state licenses, the applicant shall forward a copy to the Department of Public Works – Development Division.

CU-2019-231

ATTACHMENT TO RLA 1:

Description:

Lot 1, Old Blue Springs, a subdivision in Jackson County, Missouri

CU-2019-231

ATTACHMENT TO RLA-3:

Attachments

Plan Commission Public Hearing Summary from July 18, 2019

Location Map

Staff Report

Names/Addresses of Surrounding Property Owners

Copy of letter to said property owners

Map showing current zoning district in area

County Code Chapter 240 – Unified Development Code

County Master Plan – “Strategy for the Future”

Application

Ordinance #4100

Copies of Licensees

Pictures of Property