

The Planning & Zoning Commission will hold a meeting in the City Hall Council Chambers, 101 S. Main Street, Joshua, Texas.

# A. CALL TO ORDER AND ANNOUNCE A QUORUM PRESENT

#### **B.** CITIZENS FORUM

The Planning & Zoning Commission invites citizens to speak on any topic. However, unless the item is specifically noted on this agenda, the Planning & Zoning Commission is required under the Texas Open Meetings Act to limit its response to responding with a statement of specific factual information, reciting the City's existing policy, or directing the person making the inquiry to visit with City Staff about the issue. No Commission deliberation is permitted. Each person will have 3 minutes to speak.

# C. REGULAR AGENDA

- <u>1.</u> Discuss, consider, and possible action on May 05, 2025, Meeting Minutes. (Staff Resource: A. Holloway)
- 2. Discuss, consider, and possible action on approving a Final Plat regarding 2.266 acres of land known as Lot 3R, Block 4, Lyra Meadows Addition, J.H. Cooper Survey, Abstract No. 145, City of Joshua, Johnson County, Texas, located at 216 CR 800A. (Staff Resource: N. Fussner)

# **D.** ADJOURN

The Planning & Zoning Commission reserves the right to meet in Executive Session closed to the public at any time in the course of this meeting to discuss matters listed on the agenda, as authorized by the Texas Open Meetings Act, Texas Government Code, Chapter 551.071 for private consultation with the attorney for the City.

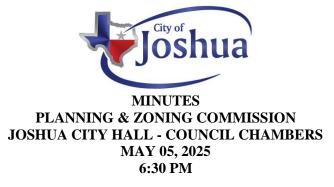
Pursuant to Section 551.127, Texas Government Code, one or more Commissioner may attend this meeting remotely using videoconferencing technology. The video and audio feed of the videoconferencing equipment can be viewed and heard by the public at the address posted above as the location of the meeting. A quorum will be physically present at the posted meeting location of City Hall.

In compliance with the Americans with Disabilities Act, the City of Joshua will provide reasonable accommodations for disabled persons attending this meeting. Requests should be received at least 24 hours prior to the scheduled meeting by contacting the City Secretary's office at 817/556-0603.

#### **CERTIFICATE**:

I hereby certify that the above agenda was posted on May 29, 2025, by 5:00 p.m. on the official bulletin board at Joshua City Hall, 101 S. Main, Joshua, Texas.

Alice Holloway, City Secretary



The Planning & Zoning Commission held a meeting in the City Hall Council Chambers, 101 S. Main Street, Joshua, Texas.

#### A. CALL TO ORDER AND ANNOUNCE A QUORUM PRESENT

Commissioner Gibson announced a quorum and called the meeting to order at 6:31 p.m.

# **B. CITIZENS FORUM**

The Planning & Zoning Commission invites citizens to speak on any topic. However, unless the item is specifically noted on this agenda, the Planning & Zoning Commission is required under the Texas Open Meetings Act to limit its response to responding with a statement of specific factual information, reciting the City's existing policy, or directing the person making the inquiry to visit with City Staff about the issue. No Commission deliberation is permitted. Each person will have 3 minutes to speak.

NA

#### C. REGULAR AGENDA

1. Discuss, consider, and possible action on April 07, 2025, meeting minutes. (Staff Resource: A. Holloway)

Motion made by Commissioner Moore to approve the minutes as presented. Seconded by Alternate 1 Rayburn.

Voting Yea: Chair Gibson, Commissioner Allred Sr, Commissioner Moore, Commissioner Purdom, Commissioner Frazier, Alternate 1 Rayburn

 Discuss, consider, and possible action on approving a Final Plat regarding 1.363 acres of land situated in the Dyer Nuner Survey, Abstract No. 643, City of Joshua, Johnson County, Texas, located at 1200 CR 905A. (Staff Resource: A. Maldonado)

Motion made by Commissioner Purdom to approve the Final Plat as presented. Seconded by Commissioner Frazier. Voting Yea: Chair Gibson, Commissioner Allred Sr, Commissioner Moore, Commissioner Purdom, Commissioner Frazier, Alternate 1 Rayburn

#### D. ADJOURN

Commissioner Gibson adjourned the meeting at 6:33 p.m.



Planning & Zoning Agenda June 2, 2025

# **Minutes Resolution**

**Action Item** 

# **Agenda Description:**

Discuss, consider, and possible action on approving a Final Plat regarding 2.266 acres of land known as Lot 3R, Block 4, Lyra Meadows Addition, J.H. Cooper Survey, Abstract No. 145, City of Joshua, Johnson County, Texas located at 216 CR 800A. (Staff Resource: N.Fussner)

# **Background Information:**

**History:** This property was platted before being annexed into the City Limits of Joshua. There have been several abandonments over time and this will clean up and create one lot with a larger buildable area.

Zoning: This property is zoned as (A) Agricultural District.

**Analysis:** This plat has been reviewed in accordance with the provisions set forth in the adopted Subdivision Ordinance. The purpose of this plat is to create one single lot for the future construction of a residential home.

Utilities: Water is provided by Johnson County Special Utility District.

Transportation: Right-of-way dedications are being dedicated with this plat.

# **Financial Information:**

N/A

# **City Contact and Recommendations:**

This plat appears to meet the minimum requirements for a Final Plat as set forth in the City of Joshua Subdivision Ordinance. Therefore, we recommend approval of the Final Plat.

# Attachments:

1. Final Plat Application

- 2. Legal Description
- 3. Vicinity Map
- 4. Final Plat Lyra Meadows
- 5. Tax Certificate

| ī                       | City of Joshua Development Services Universal Application                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |  |  |  |  |  |  |  |  |
|-------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|--|--|--|--|--|
|                         | Please check the appropriate box below to indicate the type of application you are requesting and provide all information required to process your request.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |  |  |  |  |  |  |  |
|                         | Pre-Application Meeting Comprehensive Plan Amendment Zoning Change   Conditional Use Permit Zoning Variance (ZBA) Subdivision Variance   Preliminary Plat Final Plat Amending Plat   Replat Planned Development Concept Plan Planned Development Detailed Plan   Minor Plat Other                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  |  |  |  |  |  |  |  |
|                         | PROJECT INFORMATION                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  |  |  |  |  |  |  |  |
| 447                     | Project Name:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |  |  |  |  |  |  |  |
| 58.7                    | Project Address (Location): 216 CR, 800A, Joshna, TX                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  |  |  |  |  |  |  |  |
| 817.558.7447            | Existing Zoning:AgProposed Zoning:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  |  |  |  |  |  |  |  |
| 1                       | Existing Use: Proposed Use:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |  |  |  |  |  |  |  |
| 209/                    | Existing Comprehensive Plan Designation: Gross Acres:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  |  |  |  |  |  |  |  |
| 1a, Texas 76058         | Application Requirements: The applicant is required to submit sufficient information that describes and justifies the proposal. See appropriate checklist located within the applicable ordinance and fee schedule for minimum requirements. Incomplete applications will not be processed.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |  |  |  |  |  |  |  |
| S. Main Street, Joshua, | Applicant: Cypthia Putman Company: WIPE CGP Investments,                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |  |  |  |  |  |  |  |
| ireet,                  | Address: <u>SI3 Forest Edge St.</u> Tel: 817-805-3167 Fax:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |  |  |  |  |  |  |  |  |
| ain Si                  | City: Burleson State: TX ZIP: 76028 Email: cputman 50 Qyahoo. com                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  |  |  |  |  |  |  |  |
| N.W                     | Property Owner: WJPE CBP Investments Company:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |  |  |  |  |  |  |  |
|                         | Address: 513 Forest Edge St Tel: 817-805-316 Fax:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  |  |  |  |  |  |  |  |
| City Hall 101           | Address: 513 Forest Edge St Tel: \$17-805-316 Fax:<br>City: Burleson State: TX ZIP: 76028 Email: Cputman 50 Gyahoo, UM                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |  |  |  |  |  |  |  |
| City                    | Key Contact: Cynthia Putman Company:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  |  |  |  |  |  |  |  |
| • III                   | Address: SAME as Above Tel: Fax:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |  |  |  |  |  |  |  |
| Dimen                   | City:State:ZIP:Email:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |  |  |  |  |  |  |  |  |
| Planning and Developme  | SIGNATURE OF PROPERTY OWNER OR APPLICANT (SIGN AND PRINT OR TYPE NAME)<br>SIGNATURE:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  |  |  |  |  |  |  |  |
| ng and                  | Print or Type Name: <u>Cuphia Putman</u><br>Known to me to be the person whose name is subscribed to the above and foregoing                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |  |  |  |  |  |  |  |
| Planni                  | instrument, and acknowledged to me that they executed the same for the purposes<br>and consideration expressed and in the capacity therein stated.<br>Given under my hand and seal of office on this of 5 day of the cut of the cu                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |  |  |  |  |  |  |  |  |
| SHUA                    | <u>Check No:</u><br><u>Notary Public</u><br><u>Notary Pu</u> |  |  |  |  |  |  |  |  |
| CITY OF JOSHUA          | Signature UANNIL DATE ALL DATE ACCEPTED BY: CM                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |  |  |  |  |  |  |  |  |
| CITY                    | Date of Complete Application                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |  |  |  |  |  |  |  |  |
|                         | ES 05/05/2010                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |  |  |  |  |  |  |  |  |
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Item 2.

OWNERS CERTIFICATE STATE OF TEXAS -COUNTY OF JOHNSON -

WHEREAS, WJP & CGO INVESTMENTS, LLC; ACTING BY AND THROUGH THE UNDER SIGNED, ITS DULY AUTHORIZED AGENT, IS THE OWNERS OF A TRACT OF LAND SITUATED IN THE J.H. COOPER SURVEY, ABSTRACT NO. 145, JOHNSON COUNTY, TEXAS AND INCLUDING LOTS 3 AND 4 EASTHILL SUBDIVISION AS RECORDED VOLUME 426, PG. 643, DEED RECORDS OF JOHNSON COUNTY, TEXAS AND A PORTION OF JOSHUA BOULEVARD CLOSED BY INSTRUMENT RECORDED IN VOLUME 470, PG. 643, DEED RECORDS OF JOHNSON COUNTY, TEXAS, ALSO BEING A TRACT OF LAND CONVEYED TO WJP & CGP INVESTMENTS LLC, RECORDED IN INST. NO. 2024-22473, DEED RECORDS OF JOHNSON COUNTY, TEXAS, (DRJCT), AND BEING MORE PARTICULARLY DESCRIBED BY METES AND BOUNDS AS FOLLOWS:

BEGINNING AT A 5/8 IRON ROD FOUND FOR THE SOUTHWEST CORNER OF HEREIN TRACT OF LAND AND THE SOUTHEAST CORNER OF A TRACT OF LAND CONVEYED TO ESTATES OF CHRISTINE M. FULLER, RECORDED IN INST. NO. 2024-20680, DRJCT, SAID IRON ROD ALSO BEING IN THE NORTH LINE OF A TRACT OF LAND CONVEYED TO TEODORO & BLANCA ESTEL DE QUIRINO, RECORDED IN INST. NO. 2025-3072, DRJCT;

THENCE N 11°38'11" W (BEARING BASIS), 223.14 FEET WITH THE EAST LINE OF SAID FULLER TRACT TO A 1/2 INCH IRON PIPE FOUND FOR THE NORTHWEST CORNER OF HEREIN TRACT AND THE SOUTHWEST CORNER OF A TRACT OF LAND CONVEYED TO BETTY L. WINKLEMAN, RECORDED IN INST. NO. 2024-33039, DRJCT;

THENCE N 89°26'03" E, 459.56 FEET WITH SAID SOUTH LINE OF WINKLEMAN TRACT TO A PK NAIL SET FOR THE NORTHEAST CORNER OF HEREIN TRACT AND THE SOUTHEAST CORNER OF A TRACT OF LAND CONVEYED TO BRENDA CHITTUM, RECORDED IN INST. NO. 2023-30819, DRJCT, ALSO BEING IN C.R. 800A (VARIABLE WIDTH ROW);

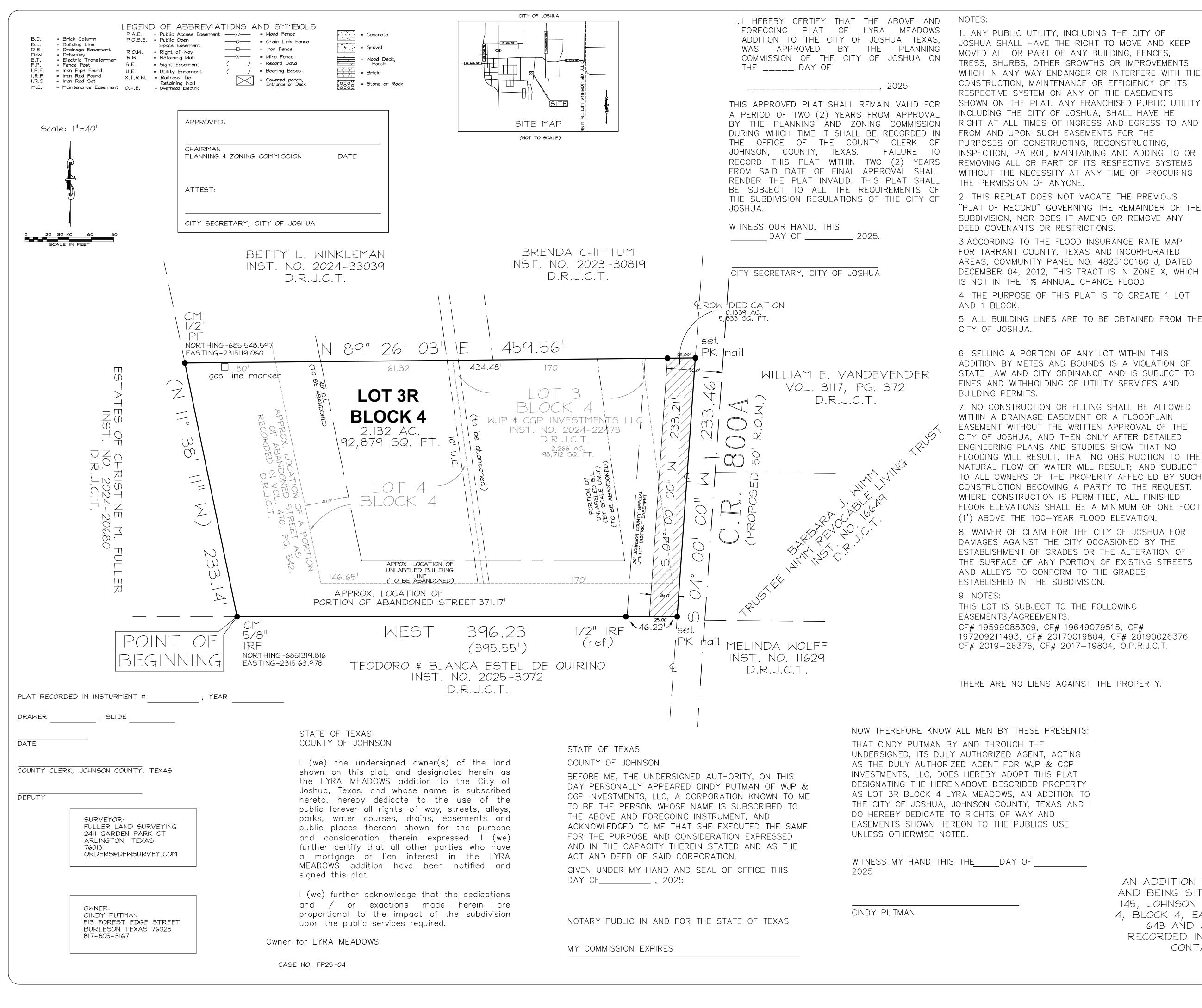
THENCE S 04°00'00" W, 233.46 FEET WITH SAID CR 800A TO A PK NAIL SET FOR THE SOUTHEAST CORNER OF HEREIN TRACT AND THE NORTHEAST CORNER OF SAID QUIRINO TRACT;

THENCE WEST, AT A DISTANCE OF 46.22 FEET PASSING A 1/2 INCH IRON ROD FOUND FOR REFERENCE AND CONTINUING IN ALL A TOTAL DISTANCE OF 396.23 FEET (DEED- 395.55 FEET) TO THE POINT OF BEGINNING AND CONTAINING 2.266 ACRES (98,712 SQUARE FEET) OF LAND.



# Vicinity Map

| 3416.00120<br>3416.00130<br>3416.00150<br>3416.00160 | 126.3416.00450<br>126.3416.00460<br>126.3416.00470<br>126.3416.00480 | 56.00241 126.3466.002<br>126.346<br>126.0145.00775            |         | 126.2243.010                  | 910 | 126.4726.01010                   |              |
|------------------------------------------------------|----------------------------------------------------------------------|---------------------------------------------------------------|---------|-------------------------------|-----|----------------------------------|--------------|
| 3416.00170<br>3416.00180<br>3416.00200               | 126.3416.00490<br>126.3416.00380<br>326.3416.00390                   | 126.0145.00780                                                |         | 126.0145.00<br>126.0145.00540 | 530 | 126.4913.07010<br>126.4913.07020 |              |
|                                                      | Situs Address:                                                       | 216 CR 800A                                                   |         |                               |     | 126.4913.0                       | 7020         |
| .3416.00220                                          |                                                                      | 1B                                                            | Mapsco: |                               | 4   | 120.4913.0                       | 17030        |
|                                                      | Legal Description:                                                   | ABST 145 TR 32 J H COOPER Acres:2.1                           |         | 126.0145.00550                |     | 126.0145.00595                   |              |
|                                                      | Abstract/Subdivision:<br>Neighborhood:                               | Abstract/Subdivision:     Neighborhood:   126.0145 - COOPER J |         |                               |     |                                  |              |
| 70                                                   | 126:3449.17050<br>126:3449.17060<br>126:3449.17030                   |                                                               |         |                               |     | 4                                | 126.0145.00. |
|                                                      | 126.3449.17100                                                       |                                                               |         | 126.0636.00100                |     | 126 0626 00700                   |              |



8

JOSHUA SHALL HAVE THE RIGHT TO MOVE AND KEEP TRESS, SHURBS, OTHER GROWTHS OR IMPROVEMENTS WHICH IN ANY WAY ENDANGER OR INTERFERE WITH THE CONSTRUCTION, MAINTENANCE OR EFFICIENCY OF ITS SHOWN ON THE PLAT. ANY FRANCHISED PUBLIC UTILITY RIGHT AT ALL TIMES OF INGRESS AND EGRESS TO AND INSPECTION, PATROL, MAINTAINING AND ADDING TO OR REMOVING ALL OR PART OF ITS RESPECTIVE SYSTEMS WITHOUT THE NECESSITY AT ANY TIME OF PROCURING "PLAT OF RECORD" GOVERNING THE REMAINDER OF THE AREAS, COMMUNITY PANEL NO. 48251C0160 J, DATED DECEMBER 04, 2012, THIS TRACT IS IN ZONE X, WHICH

ADDITION BY METES AND BOUNDS IS A VIOLATION OF STATE LAW AND CITY ORDINANCE AND IS SUBJECT TO

FLOODING WILL RESULT, THAT NO OBSTRUCTION TO THE NATURAL FLOW OF WATER WILL RESULT; AND SUBJECT TO ALL OWNERS OF THE PROPERTY AFFECTED BY SUCH CONSTRUCTION BECOMING A PARTY TO THE REQUEST. FLOOR ELEVATIONS SHALL BE A MINIMUM OF ONE FOOT

THE SURFACE OF ANY PORTION OF EXISTING STREETS

OWNERS CERTIFICATE STATE OF TEXAS -COUNTY OF JOHNSON

WHEREAS, WJP & CGO INVESTMENTS, LLC; ACTING BY AND THROUGH THE UNDER SIGNED, ITS DULY AUTHORIZED AGENT, IS THE OWNERS OF A TRACT OF LAND SITUATED IN THE J.H. COOPER SURVEY, ABSTRACT NO. 145, JOHNSON COUNTY, TEXAS AND INCLUDING LOTS 3 AND 4 EASTHILL SUBDIVISION AS RECORDED VOLUME 426, PG. 643, DEED RECORDS OF JOHNSON COUNTY. TEXAS AND A PORTION OF JOSHUA BOULEVARD CLOSED BY INSTRUMENT RECORDED IN VOLUME 470, PG. 643, DEED RECORDS OF JOHNSON COUNTY, TEXAS, ALSO BEING A TRACT OF LAND CONVEYED TO WJP & CGP INVESTMENTS LLC, RECORDED IN INST. NO. 2024-22473, DEED RECORDS OF JOHNSON COUNTY, TEXAS, (DRJCT), AND BEING MORE PARTICULARLY DESCRIBED BY METES AND BOUNDS AS FOLLOWS:

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THENCE S 04°00'00" W, 233.46 FEET WITH SAID CR 800A TO A PK NAIL SET FOR THE SOUTHEAST CORNER OF HEREIN TRACT AND THE NORTHEAST CORNER OF SAID QUIRINO TRACT;

THENCE WEST, AT A DISTANCE OF 46.22 FEET PASSING A 1/2 INCH IRON ROD FOUND FOR REFERENCE AND CONTINUING IN ALL A TOTAL DISTANCE OF 396.23 FEET (DEED- 395.55 FEET) TO THE POINT OF BEGINNING AND CONTAINING 2.266 ACRES (98,712 SQUARE FEET) OF LAND.

SURVEYOR'S CERTIFICATE

THIS IS TO CERTIFY THAT I, ROBERT L. POUND, A REGISTERED PROFESSIONAL LAND SURVEYOR OF THE STATE OF TEXAS, HAVE PREPARED THIS PLAT OF THE ABOVE SUBDIVISION FROM AN ACTUAL SURVEY ON THE GROUND: AND THAT ALL MONUMENTS FOR LOT CORNERS, ANGLE POINT, AN POINTS OF CURVATURE SHOWN THEREON AS "SET" WERE PLACED UNDER MY PERSONAL SUPERVISION IN ACCORDANCE WITH THE SUBDIVISION ORDINANCE OF THE CITY OF JOSHUA.

ROBERT L. POUND REGISTERED PROFESSIONAL LAND SURVEYOR TEXAS REGISTRACTION NO. 1976 TBPELS FIRM REG. NO. 10091800 DATED 04/26/25

FINAL PLAT SHOWING LOT 3R, BLOCK 4

# LYRA MEADOWS

AN ADDITION TO THE CITY OF JOSHUA, JOHNSON COUNTY, TEXAS AND BEING SITUATED IN THE J.H. COOPER SURVEY, ABSTRACT NO. 145, JOHNSON COUNTY, TEXAS & BEING A REPLAT OF LOTS 3 AND 4, BLOCK 4, EASTHILL SUBDIVISION AS RECORDED IN VOL. 426, PG. 643 AND A PORTION OF JOSHUA ROAD ABANDONMENT AS RECORDED IN VOL. 470, PG. 643, JOHNSON COUNTY TEXAS AND CONTAINING 2.266 ACRES/98,712 SQ. FT OF LAND I RESIDENTIAL LOT DATE OF PREPARATION - 4/26/25

TAX CERTIFICATE FOR ACCOUNT : 126-0145-00540 AD NUMBER: R000004620 GF NUMBER: CERTIFICATE NO: 16575043

COLLECTING AGENCY

Johnson County P O BOX 75 CLEBURNE TX 76033-0075

#### **REQUESTED BY**

**CYNTHIA PUTMAN** 

513 FOREST EDGE ST BURLESON TX 760280000 DATE: 4/25/2025 FEE: \$10.00 **PROPERTY DESCRIPTION** ABST 145|TR 32|J H COOPER

0000216 CR 800A ACRES 2.1

#### PROPERTY OWNER

WJP & CGP INVESTMENTS LLC

**513 FOREST EDGE ST** BURLESON TX 760280000

THIS IS TO CERTIFY THAT, AFTER A CAREFUL CHECK OF THE RECORDS OF THE JOHNSON COUNTY TAX OFFICE, THE FOLLOWING DELINQUENT TAXES, PENALTIES, AND INTEREST ARE DUE ON THE DESCRIBED PROPERTY.

THE ABOVE DESCRIBED PROPERTY TAX HAS/IS RECEIVING SPECIAL APPRAISAL BASED ON ITS USE, AND ADDITIONAL ROLLBACK TAXES MAY BECOME DUE BASED ON THE PROVISIONS OF THE SPECIAL APPRAISAL. (IF APPLICABLE)

| CURRENT VALUES                                                                                                                                                        |                      |      |      |      |         |      |            |  |  |  |  |  |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|------|------|------|---------|------|------------|--|--|--|--|--|
| LAND MKT VALUE:131,750IMPROVEMENT :31,886AG LAND VALUE:00DEF HOMESTEAD:0APPRAISED VALUE:163,636LIMITED VALUE:0EXEMPTIONS:23.231 Circuit Breaker Limitation0LAWSUITS:0 |                      |      |      |      |         |      |            |  |  |  |  |  |
| YEAR                                                                                                                                                                  | TAX UNIT             | LEVY | PEN  | INT  | DEF INT | ATTY | AMOUNT DUE |  |  |  |  |  |
| 2024                                                                                                                                                                  | CITY OF JOSHUA       | 0.00 | 0.00 | 0.00 | 0.00    | 0.00 | 0.00       |  |  |  |  |  |
| 2024                                                                                                                                                                  | EMER SERV DISTRICT 1 | 0.00 | 0.00 | 0.00 | 0.00    | 0.00 | 0.00       |  |  |  |  |  |
| 2024                                                                                                                                                                  | FARM TO MARKET LTRD  | 0.00 | 0.00 | 0.00 | 0.00    | 0.00 | 0.00       |  |  |  |  |  |
| 2024                                                                                                                                                                  | HILL COLL-JOSHUA     | 0.00 | 0.00 | 0.00 | 0.00    | 0.00 | 0.00       |  |  |  |  |  |

0.00

0.00

0.00

0.00

0.00 0.00 0.00 2024 SUB TOTAL

0.00

0.00

0.00 \$0.00

TOTAL CERTIFIED TAX DUE 4/2025 :

ISSUED TO : ACCOUNT NUMBER:

2024 Johnson County

2024 JOSHUA ISD

**CYNTHIA PUTMAN** 126-0145-00540

\$0.00

0.00

0.00

CERTIFIED BY :

JOHNSON COUNTY

There may be a cost and/or Fees that are unknown to the Johnson County Tax office



PAGE 1 OF 1