

## REQUEST FOR NEIGHBORHOOD MEETING

Date: 12/29/2022

To Whom This May Concern:

I am requesting approval from the Zoning Hearing Examiner within the City of Albuquerque for a conditional use or variance to allow the operation of a State Licensed Cannabis Consumption Lounge, pursuant to IDO 4-3(D)(35)(i)

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Property owner 3417 CENTRAL,LLC

Agent if applicable CHRIS LEE, WEEDS.

Property Address 3417 CENTRAL AVE NE, Albuquerque, NM, 87106.

This letter is an offer to meet with you to provide additional information. If you wish to meet, please respond within 15 days. If you do not want to meet, or you support the proposal, please let me know.

Thank you,

Applicant Name CHRIS LEE

Email CHRIS@WEEDS.TEAM

Phone Number 505-453-8565

The City may require the applicant to attend a City-sponsored facilitated meeting with the Neighborhood Associations whose boundaries include or are adjacent to the proposed project, based on the complexity and potential impacts of a proposed project. For more information, please contact the ZHE Administrative Assistant Suzie Sanchez at 505-924-3894 or [suzannasanchez@cabq.gov](mailto:suzannasanchez@cabq.gov).

Please note: "You may submit written comments to the Zoning Hearing Examiner up to 6 days before the hearing (5pm on the Wednesday before the hearing). Written comments received after that deadline will not be taken into consideration for this application.

[Note: Items with an asterisk (\*) are required.]

## Neighborhood Meeting Request for a Proposed Project in the City of Albuquerque

Date of Request\*: FEBRUARY 15TH, 2023

This request for a Neighborhood Meeting for a proposed project is provided as required by Integrated Development Ordinance (IDO) [Subsection 14-16-6-4\(K\) Public Notice](#) to:

Neighborhood Association (NA)\*: NOB HILL

Name of NA Representative\*: Jeff Hoehn or Gary Eyster

Email Address\* or Mailing Address\* of NA Representative<sup>1</sup>: Jeffh@clnabq meyster1@me.com

The application is not yet submitted. If you would like to have a Neighborhood Meeting about this proposed project, please respond to this request within 15 days.<sup>2</sup>

Email address to respond yes or no: CHRIS@WEEDS.TEAM

The applicant may specify a Neighborhood Meeting date that must be at least 15 days from the Date of Request above, unless you agree to an earlier date.

Meeting Date / Time / Location:

To be determined based on inquiries

### Project Information Required by [IDO Subsection 14-16-6-4\(K\)\(1\)\(a\)](#)

1. Subject Property Address\* 3417 CENTRAL AVE NE  
Location Description \_\_\_\_\_
2. Property Owner\* 3417 CENTRAL, LLC
3. Agent/Applicant\* [if applicable] CHRIS LEE, WEEDS.
4. Application(s) Type\* per IDO [Table 6-1-1](#) [mark all that apply]
  - Conditional Use Approval
  - Permit \_\_\_\_\_ (Carport or Wall/Fence – Major)
  - Site Plan
  - Subdivision \_\_\_\_\_ (Minor or Major)

<sup>1</sup> Pursuant to [IDO Subsection 14-16-6-4\(K\)\(5\)\(a\)](#), email is sufficient if on file with the Office of Neighborhood Coordination. If no email address is on file for a particular NA representative, notice must be mailed to the mailing address on file for that representative.

<sup>2</sup> If no one replies to this request, the applicant may be submitted to the City to begin the review/decision process.

[Note: Items with an asterisk (\*) are required.]

- Vacation \_\_\_\_\_ (Easement/Private Way or Public Right-of-way)
- Variance
- Waiver
- Zoning Map Amendment
- Other: \_\_\_\_\_

Summary of project/request<sup>3\*</sup>:

Conditional Use Approval to operate an on-site cannabis consumption area on the premises of a licensed and permitted cannabis retail establishment, pursuant to 4-3(D)(35)(i).

5. This type of application will be decided by<sup>\*</sup>:  City Staff  
 OR at a public meeting or hearing by:  
 Zoning Hearing Examiner (ZHE)  Development Review Board (DRB)  
 Landmarks Commission (LC)  Environmental Planning Commission (EPC)  
 City Council
6. Where more information about the project can be found<sup>\*4</sup>:  
 \_\_\_\_\_

**Project Information Required for Mail/Email Notice by [IDO Subsection 6-4\(K\)\(1\)\(b\)](#):**

1. Zone Atlas Page(s)<sup>\*5</sup> K-16
2. Architectural drawings, elevations of the proposed building(s) or other illustrations of the proposed application, as relevant<sup>\*</sup>: Attached to notice or provided via website noted above
3. The following exceptions to IDO standards will be requested for this project<sup>\*</sup>:  
 Deviation(s)       Variance(s)       Waiver(s)  
 Explanation:  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_
4. An offer of a Pre-submittal Neighborhood Meeting is required by [Table 6-1-1](#)<sup>\*</sup>:  Yes     No

<sup>3</sup> Attach additional information, as needed to explain the project/request. Note that information provided in this meeting request is conceptual and constitutes a draft intended to provide sufficient information for discussion of concerns and opportunities.

<sup>4</sup> Address (mailing or email), phone number, or website to be provided by the applicant

<sup>5</sup> Available online here: <http://data.cabq.gov/business/zoneatlas/>

[Note: Items with an asterisk (\*) are required.]

5. **For Site Plan Applications only\***, attach site plan showing, at a minimum:
- a. Location of proposed buildings and landscape areas.\*
  - b. Access and circulation for vehicles and pedestrians.\*
  - c. Maximum height of any proposed structures, with building elevations.\*
  - d. **For residential development\***: Maximum number of proposed dwelling units.
  - e. **For non-residential development\***:
    - Total gross floor area of proposed project.
    - Gross floor area for each proposed use.

**Additional Information:**

1. From the IDO Zoning Map<sup>6</sup>:
- a. Area of Property [typically in acres] \_\_\_\_\_
  - b. IDO Zone District \_\_\_\_\_
  - c. Overlay Zone(s) [if applicable] \_\_\_\_\_
  - d. Center or Corridor Area [if applicable] \_\_\_\_\_
2. Current Land Use(s) [vacant, if none] \_\_\_\_\_
- \_\_\_\_\_

**Useful Links**

**Integrated Development Ordinance (IDO):**

<https://ido.abc-zone.com/>

**IDO Interactive Map**

<https://tinyurl.com/IDOzoningmap>

Cc: District 6 coalition of NHA \_\_\_\_\_ [Other Neighborhood Associations, if any]

Patricia Wilson, \_\_\_\_\_ info@wilsonstudio.com

Mandy Warr, \_\_\_\_\_ Mandy@theremedydayspa.com

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<sup>6</sup> Available here: <https://tinurl.com/idozoningmap>