



Legislation Text

File #: 24-2501, **Version:** 1

Department: County Engineer

Department Head/Elected Official: Milton Rahman, PhD, P.E., PMP, CFM, County Engineer

Regular or Supplemental RCA: Regular RCA

Type of Request: Plat/Replat

Project ID (if applicable):

Vendor/Entity Legal Name (if applicable): OWENS MANAGEMENT SYSTEMS, LLC

MWDBE Contracted Goal (if applicable): N/A

MWDBE Current Participation (if applicable): N/A

Justification for 0% MWDBE Participation Goal: N/A - Goal not applicable to request

Request Summary (Agenda Caption):

Request for approval of plat Chuys C5 Trailers Complex. Consultant, OWENS MANAGEMENT SYSTEMS, LLC, Precinct 3.

Background and Discussion:

This plat has been reviewed by the Harris County Engineering Department and the applicant has completed all statutory and Harris County requirements. The County Engineer recommends the approval of this plat in accordance with TX Local Government Code 232.002 which states the Commissioners' Court must approve plats in unincorporated areas of Harris County before it can be filed with the County Clerk.

Expected Impact:

This approval will ensure that development in unincorporated areas will not pose a threat to the safety and welfare of the public as prescribed by Commissioners Court

Alternative Options:

Should Commissioners' Court elect not approve this plat, a written statement detailing the reasons for disapproval per TX Local Government Code 232.0028 will be required. This statement must include a citation to the law, including statute or order that is the basis of the disapproval; and may not be arbitrary.

Alignment with Goal(s):

- ☐ Justice and Safety
- ☒ Economic Opportunity
- ☐ Housing
- ☐ Public Health
- ☐ Transportation

- ☐ Flooding
- ☐ Environment
- ☐ Governance and Customer Service

Prior Court Action (if any):

| Date | Agenda Item # | Action Taken |
|------|---------------|--------------|
| | | |

Location:

Address (if applicable):

Precinct(s): Precinct 3

Fiscal and Personnel Summary

| | | | | |
|---|--------------------------|-----------|-------|--------------------|
| Service Name | | | | |
| | Current Fiscal Year Cost | | | Annual Fiscal Cost |
| | Labor | Non-Labor | Total | Recurring Expenses |
| Funding Sources | | | | |
| Existing Budget | | | | |
| Choose an item. | \$ | \$ | \$ | \$ |
| Choose an item. | \$ | \$ | \$ | \$ |
| Choose an item. | \$ | \$ | \$ | \$ |
| Total Current Budget | \$ | \$ | \$ | \$ |
| Additional Budget Request (<i>Requires Fiscal Review Request Form</i>) | | | | |
| Choose an item. | \$ | \$ | \$ | \$ |
| Choose an item. | \$ | \$ | \$ | \$ |
| Choose an item. | \$ | \$ | \$ | \$ |
| Total Additional Budget Request | \$ | \$ | \$ | \$ |
| Total Funding Request | \$ | \$ | \$ | \$ |
| Personnel (Fill out section only if requesting new PCNs) | | | | |
| Current Position Count for Service | - | - | - | - |
| Additional Positions Request | - | - | - | - |
| Total Personnel | N/A | N/A | N/A | N/A |

Anticipated Court Date: April 23, 2024**Anticipated Implementation Date** (if different from Court date):**Emergency/Disaster Recovery Note:** Not an emergency, disaster, or COVID-19 related item**Contact(s) name, title, department:** Darrell Hahn, Permits Manager, HCED

Attachments (if applicable):

Title Report, Tax Certificates (if applicable), Utility Service Plan form, Utility capacity letter, County/ State Agency water well approval (if applicable), and Subdivision name duplication letter (if applicable)