

1801 Rufe Snow Dr.

butcher\_eric@yahoo.com  
To: frankroszell@yahoo.com

Mr. Rozzell

11/28/2016

In response to your letter you sent out proposing development of the property at 1801 Rufe Snow Dr. The neighbors and I have several concerns with the plan you proposed. The property is now zoned NS, Neighborhood Service District. You are proposing a 11000 sq. ft. building the zoning only allows 6000 sq. ft. Also a brick screening wall is supposed to be built between your property and adjacent residential properties. We also have questions about lighting and landscaping that need to be addressed. We also have concerns about the structure itself (ie) what materials what type roof etc. and do they conform to the zoning now in place. We have no problem with property being developed only that it be aesthetically pleasing and conform to the standards that are in place for the city of Keller.

Sincerely

Eric Butcher  
700 Waters Edge  
Keller, Texas 76248  
butcher\_eric@yahoo.com

3751 n story environm...  
5220 hwy 121  
7424  
801 rufe  
ad for campaign  
advertisement  
banking  
Basswood  
Beuty salon  
building  
car wash  
ceel phone pice  
Clay  
computer  
cos  
credit card  
cvs  
Deleted emails  
facebook  
g un range  
gas  
guns  
Health  
house paint  
house plans

BASED ON TAX RECORD  
LETTERS  
SENT TO  
6 PROPERTIES  
THAT BUT THE PROPERTY  
AWARE  
INDICATE NEIGHBORS WERE  
Frank Roszell  
ONLY 1 PERSON WAS THERE  
LAST NIGHT OF THE 6 PROPERTIES  
4 PEOPLE THERE LAST NIGHT  
DID NOT BUT THE PROPERTY

**FRANK ROSZELL**  
2230 Union Church Rd.  
Keller, TX 76248

November 9, 2016

Trent Bowling  
1538 Briar Meadow Dr.  
Keller, TX 76248

Re: 1801 Rufe Snow Drive

My name is Frank Roszell. Approximately two years ago, to help a friend settle an estate, I purchased the property that your backyard butts up against. I live in Keller and for two years I have tried to come up with a use for the property. The property has many pitfalls and is the reason it has not been developed. For example, there is a 40-foot wide easement that runs north and south and butts up against your backyard fences. The easement is owned by the gas company. They are very strict and stated to the City of Keller and to me that nothing can be built on the easement. Landscaping cannot be done on the easement. So basically the only thing I can do with that part of the property is mow it and pay tax.

As a good neighbor, I want to give you some idea of what I'm thinking about building on the property known as 1801 Rufe Snow Drive. The idea is to build a one story 11,400 sq. ft. professional office and retail facility. (See the attached foot print.) The garage drawn will be for my personal cars and serve the same purpose as your garage. The building will be sprinklered for ultimate fire protection.

Also attached is a photograph of a building in Hurst. While the building I design will not be exactly like the picture, it will be similar.

I want to be a good neighbor and that is the reason I am sending you this information. My cell phone is 817-903-8887. My email is [frankroszell@yahoo.com](mailto:frankroszell@yahoo.com).

The City has specific uses specified by the zoning designated on its website. I am in hopes there is a demand for this type of space to lease to a doctor, dentist, and such. The money I spend on the building will come directly from me personally. I am a small businessman who lives in Keller and would like to invest in Keller.

I am sure the City of Keller will put out some notice to you all.

Please acknowledge receipt of this letter to my email address so I know you got the letter. If you have any questions or concerns call me, send me an email, or I can come by and visit.

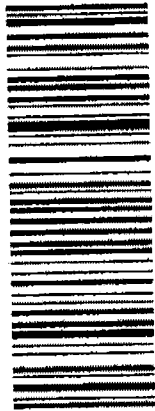
Sincerely yours,



Frank Roszell

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT  
OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

**CERTIFIED MAIL**



7016 0910 0001 3675 9801  
7016 0910 0001 3675 9801

**U.S. Postal Service™**  
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**OFFICIAL USE**

Certified Mail Fee \$ 3.30  
Extra Services & Fees (check box, add fees as appropriate)  
☒ Return Receipt (hardcopy) \$ 2.70  
☐ Return Receipt (electronic) \$ \_\_\_\_\_  
☐ Certified Mail Restricted Delivery \$ \_\_\_\_\_  
☐ Adult Signature Required \$ \_\_\_\_\_  
☐ Adult Signature Restricted Delivery \$ \_\_\_\_\_  
Postage \$ 47  
Total Postage and Fees \$ 647

Postmark  
Here

Sent To Trent Bowling  
Street and Apt. No., or P.O. Box No. 1538 Briar Meadow Dr.  
City, State, ZIP+4® Keller, TX 76248  
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Trent Bowling  
1538 Briar Meadow Dr.  
Keller, TX 76248



9590 9403 0361 5163 5243 37

2. Article Number (Transfer from service label)

7016 0910 0001 3675 9801

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

**X**

☐ Agent

☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

3. Service Type

- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☒ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ☐ Mail Restricted Delivery

- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☒ Return Receipt for Merchandise
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

PS Form 3811, April 2015 PSN 7530-02-000-9053

Domestic Return Receipt

**FRANK ROSZELL**  
2230 Union Church Rd.  
Keller, TX 76248

November 9, 2016

James Eric Butcher  
700 Waters Edge  
Keller, TX 76248

Re: 1801 Rufe Snow Drive

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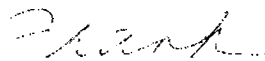
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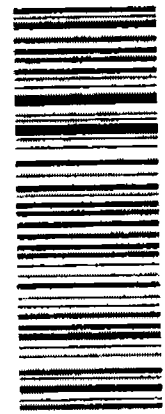
Please acknowledge receipt of this letter to my email address so I know you got the letter. If you have any questions or concerns call me, send me an email, or I can come by and visit.

Sincerely yours,



Frank Roszell

CERTIFIED MAIL®



Frank Roszell  
2230 Union Church Rd.  
Keller, TX 76248

7016 0910 0001 3675 9788  
7016 0910 0001 3675 9788

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For delivery information, visit our website at [www.usps.com](http://www.usps.com)™.

OFFICIAL USE

Certified Mail Fee	\$ 3.30
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$ 2.60
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$
Postage	\$ 47
Total Postage and Fees	\$ 6.17

Postmark  
Here

Sent To:	James Eric Butcher
Street and Apt. No., or PO Box No.	700 Waters Edge
City, State, ZIP+4	Keller, TX 76248

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:  
James Eric Butcher  
700 Waters Edge  
Keller, TX 76248



9590 9403 0361 5163 5243 13

2. Article Number (Transfer from service label)  
7016 0910 0001 3675 9788

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature	
X	<input type="checkbox"/> Agent <input type="checkbox"/> Addressee
B. Received by (Printed Name)	C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

3. Service Type	<input type="checkbox"/> Priority Mail Express®
<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Registered Mail™
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail Restricted Delivery
<input checked="" type="checkbox"/> Certified Mail®	<input checked="" type="checkbox"/> Return Receipt for Merchandise
<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Signature Confirmation™
<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery
<input type="checkbox"/> Collect on Delivery Restricted Delivery	

**FRANK ROSZELL**  
2230 Union Church Rd.  
Keller, TX 76248

November 9, 2016

Joann Ferguson  
1540 Briar Meadow Dr.  
Keller, TX 76248

Re: 1801 Rufe Snow Drive

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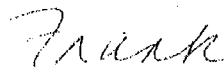
I want to be a good neighbor and that is the reason I am sending you this information. My cell phone is 817-903-8887. My email is frankroszell@yahoo.com.

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Sincerely yours,



Frank Roszell

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT  
OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

**CERTIFIED MAIL®**



7016 0910 0001 3675 9818  
7016 0910 0001 3675 9818

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**OFFICIAL USE**

Certified Mail Fee \$ 3.30

Extra Services & Fees (check box, add fees as appropriate)

☒ Return Receipt (hardcopy) \$ 2.70

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage \$ 4.17

Total Postage and Fees \$ 6.47

Postmark  
Here

Sent To: Joann Ferguson

Street and Apt. No. or P.O. Box No. 1540 Briar Meadow Dr.

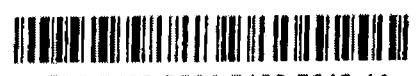
City, State, ZIP+4® Keller TX 76248

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:  
Joann Ferguson  
1540 Briar Meadow Dr.  
Keller TX 76248



9590 9403 0361 5163 5243 44

2. Article Number (Transfer from service label)

7016 0910 0001 3675 9818

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature ☒ Agent ☐ Addressee

X

B. Received by (Printed Name) C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes ☐ No

If YES, enter delivery address below:

3. Service Type

☐ Adult Signature ☐ Priority Mail Express®

☐ Adult Signature Restricted Delivery ☐ Registered Mail™

☒ Certified Mail® ☐ Registered Mail Restricted Delivery

☐ Certified Mail Restricted Delivery ☒ Return Receipt for Merchandise

☐ Collect on Delivery ☐ Signature Confirmation™

☐ Collect on Delivery Restricted Delivery ☐ Signature Confirmation Restricted Delivery

**FRANK ROSZELL**  
2230 Union Church Rd.  
Keller, TX 76248

November 9, 2016

Stacey Cornell  
1536 Briar Meadow Dr.  
Keller, TX 76248

Re: 1801 Rufe Snow Drive

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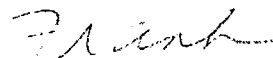
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Sincerely yours,

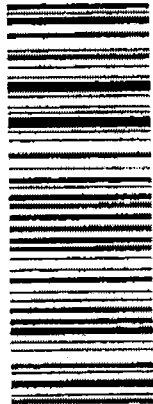


Frank Roszell



PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT  
OF THE RETURN ADDRESS. FOLD AT DOTTED LINE.

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7016 0910 0001 3675 9795  
7016 0910 0001 3675 9795

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**OFFICIAL USE**

Certified Mail Fee	\$ 3.30
Extra Services & Fees (check box, add fees as appropriate)	
<input checked="" type="checkbox"/> Return Receipt (hardcopy)	\$ 2.70
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$
Postage	\$ 47
Total Postage and Fees	\$ 6.47

Postmark  
Here

Sent To	Stacey Cornell
Street and Apt. No., or PO Box No.	1536 Briar Meadow Dr.
City, State, ZIP+4®	Keller TX 76248

PS Form 3800, April 2015 PSN 7530-02-000-8047

See Reverse for Instructions

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Stacey Cornell  
1536 Briar Meadow Dr.  
Keller TX 76248



9590 9403 0361 5163 5243 20

2. Article Number (Transfer from service label)

7016 0910 0001 3675 9795

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

**X**

- ☐ Agent  
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

3. Service Type

- ☐ Adult Signature  
☐ Adult Signature Restricted Delivery  
☒ Certified Mail®  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Collect on Delivery Restricted Delivery

- ☐ Priority Mail Express®  
☐ Registered Mail™  
☐ Registered Mail Restricted Delivery  
☐ Return Receipt for Merchandise  
☐ Signature Confirmation™  
☐ Signature Confirmation Restricted Delivery

Mail  
Restricted Delivery  
(00)

PS Form 3811, April 2015 PSN 7530-02-000-8053

Domestic Return Receipt

**FRANK ROSZELL**  
2230 Union Church Rd.  
Keller, TX 76248

November 9, 2016

Leah Crum  
1544 Briar Meadow Dr.  
Keller, TX 76248

Re: 1801 Rufe Snow Drive

My name is Frank Roszell. Approximately two years ago, to help a friend settle an estate, I purchased the property that your backyard butts up against. I live in Keller and for two years I have tried to come up with a use for the property. The property has many pitfalls and is the reason it has not been developed. For example, there is a 40-foot wide easement that runs north and south and butts up against your backyard fences. The easement is owned by the gas company. They are very strict and stated to the City of Keller and to me that nothing can be built on the easement. Landscaping cannot be done on the easement. So basically the only thing I can do with that part of the property is mow it and pay tax.

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Sincerely yours,



Frank Roszell

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT  
OF THE RETURN ADDRESS FOLD AT DOTTED LINE

**CERTIFIED MAIL®**



7016 0910 0001 3675 9832  
7016 0910 0001 3675 9832

**U.S. Postal Service™**  
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**OFFICIAL USE**

Certified Mail Fee \$ 3.36  
Extra Services & Fees (check box, add fee as appropriate)  
☒ Return Receipt (hardcopy) \$ 2.96  
☐ Return Receipt (electronic) \$  
☐ Certified Mail Restricted Delivery \$  
☐ Adult Signature Required \$  
☐ Adult Signature Restricted Delivery \$  
Postage \$ 47  
Total Postage and Fees \$ 6.47

Postmark  
Here

Sent To Leah Crum  
Street and Apt. No. or PO Box No. 1544 Briar Meadow Dr.  
City, State, ZIP+4® Keller TX 76248  
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

**SENDER: COMPLETE THIS SECTION**

- Complete Items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Leah Crum  
1544 Briar Meadow Dr.  
Keller, TX 76248



9590 9403 0361 5163 5243 68

2. Article Number (Transfer from service label)

7016 0910 0001 3675 9832

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

**X**

☐ Agent

☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

3. Service Type

- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☒ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ☐ Mail Restricted Delivery

- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☒ Return Receipt for Merchandise
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

PS Form 3811, April 2015 PSN 7530-02-000-9053

Domestic Return Receipt

**SENDER: COMPLETE THIS SECTION**

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Leah Crum  
1544 Briar Meadow Dr.  
Keller, TX 76248



9590 9403 0361 5163 5243 68

2. Article Number (Transfer from service label)

7016 0910 0001 3675 9832

PS Form 3811, April 2015 PSN 7530-02-000-9053

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A. Signature

X

☐ Agent

☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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If YES, enter delivery address below: ☐ No

3. Service Type

☐ Adult Signature

☐ Adult Signature Restricted Delivery

☒ Certified Mail®

☐ Certified Mail Restricted Delivery

☐ Collect on Delivery

☐ Collect on Delivery Restricted Delivery

☐ Insured Mail

Mail Restricted Delivery  
(00)

☐ Priority Mail Express®

☐ Registered Mail™

☐ Registered Mail Restricted Delivery

☒ Return Receipt for Merchandise

☐ Signature Confirmation™

☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

**FRANK ROSZELL**  
2230 Union Church Rd.  
Keller, TX 76248

November 9, 2016

Dale S. King  
1542 Briar Meadow Dr.  
Keller, TX 76248

Re: 1801 Rufe Snow Drive

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As a good neighbor, I want to give you some idea of what I'm thinking about building on the property known as 1801 Rufe Snow Drive. The idea is to build a one story 11,400 sq. ft. professional office and retail facility. (See the attached foot print.) The garage drawn will be for my personal cars and serve the same purpose as your garage. The building will be sprinklered for ultimate fire protection.

Also attached is a photograph of a building in Hurst. While the building I design will not be exactly like the picture, it will be similar.

I want to be a good neighbor and that is the reason I am sending you this information. My cell phone is 817-903-8887. My email is frankroszell@yahoo.com.

The City has specific uses specified by the zoning designated on its website. I am in hopes there is a demand for this type of space to lease to a doctor, dentist, and such. The money I spend on the building will come directly from me personally. I am a small businessman who lives in Keller and would like to invest in Keller.

I am sure the City of Keller will put out some notice to you all.

Please acknowledge receipt of this letter to my email address so I know you got the letter. If you have any questions or concerns call me, send me an email, or I can come by and visit.

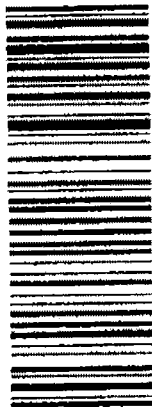
Sincerely yours,



Frank Roszell

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT  
OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

**CERTIFIED MAIL®**



7016 0910 0001 3675 9825  
7016 0910 0001 3675 9825

**U.S. Postal Service™**  
**CERTIFIED MAIL® RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

**OFFICIAL USE**

Certified Mail Fee	\$ 3.31	Postmark Huro
Extra Services & Fees (check box, add fee as appropriate)		
<input checked="" type="checkbox"/> Return Receipt (hardcopy)	\$ 2.70	
<input type="checkbox"/> Return Receipt (electronic)	\$	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$	
<input type="checkbox"/> Adult Signature Required	\$	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$	
Postage	\$ 1.77	
Total Postage and Fees	\$ 6.47	
Sent To	Dale S. King	
Street and Apt. No., or PO Box No.	1542 Briar Meadow Dr.	
City, State, ZIP+4®	Keller, TX 76248	
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions		

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Dale S. King  
1542 Briar Meadow Dr.  
Keller, TX 76248



9590 9403 0361 5163 5243 51

2. Article Number (Transfer from service label)

7016 0910 0001 3675 9825

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

**X**

☐ Agent

☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

3. Service Type

- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☒ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ☐ Mail
- ☐ Mail Restricted Delivery

- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☒ Return Receipt for Merchandise
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

PS Form 3811, April 2015 PSN 7530-02-000-9053

Domestic Return Receipt

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Dale S. King  
1542 Britar Meadow Dr.  
Keller, TX 76248



9590 9403 0361 5163 5243 51

2. Article Number (Transfer from service label)

7016 0910 0001 3675 9825

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X

- ☐ Agent  
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes  
If YES, enter delivery address below: ☐ No

3. Service Type

- |  |   |
|--|---|
| <input type="checkbox"/> Adult Signature                         | <input type="checkbox"/> Priority Mail Express®                     |
| <input type="checkbox"/> Adult Signature Restricted Delivery     | <input type="checkbox"/> Registered Mail™                           |
| <input type="checkbox"/> Certified Mail®                         | <input type="checkbox"/> Registered Mail Restricted Delivery        |
| <input type="checkbox"/> Certified Mail Restricted Delivery      | <input checked="" type="checkbox"/> Return Receipt for Merchandise  |
| <input type="checkbox"/> Collect on Delivery                     | <input type="checkbox"/> Signature Confirmation™                    |
| <input type="checkbox"/> Collect on Delivery Restricted Delivery | <input type="checkbox"/> Signature Confirmation Restricted Delivery |
| <input type="checkbox"/> Mail Restricted Delivery (X)            |   |