



## APPLICATION

- Amended Plat    Annexation    Final Plat    Preliminary Plat    Replat  
 Site Plan    SUP    Zoning Change    Other \_\_\_\_\_

### SECTION 1: APPLICANT / OWNER INFORMATION

Address \_\_\_\_\_ Telephone \_\_\_\_\_

Applicant Status:  Owner  Representative **Must be signed by owner, designating the applicant to act on their behalf.**

Owner \_\_\_\_\_ Telephone \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip Code \_\_\_\_\_

Ownership  Individual  Trust  Partnership  Corporation   Acreage for Annexation \_\_\_\_\_

**Note: If ownership is a partnership or corporation, name the partners or principals and their positions on a separate sheet.**

Site Address \_\_\_\_\_ Zoning of Property \_\_\_\_\_

Subdivision Name \_\_\_\_\_

Legal Description \_\_\_\_\_

Request or Proposed Use (***In Detail***) \_\_\_\_\_

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**ZONING ORDINANCE – SECTION 22-100 – PENALTY FOR VIOLATIONS:** Any person, firm or corporation who violates this ordinance or fails to comply with any of its requirements shall, upon conviction thereof may be fined not less than Two Hundred Dollars (\$200.00) nor more than Two Thousand Dollars (\$2,000.00). Each day such violation continues shall be considered a separate offense.

I, being the undersigned applicant, have read and understand the information provided on this application and understand that all of the information depicted on the Plat and/or Site Plan shall be adhered to as amended and approved by the Board of Adjustment, Planning and Zoning, and/or the City Council. This request will not be scheduled until all payments, Site Plans, and information is provided. No construction work shall begin until a building permit is obtained.

I, being the undersigned applicant, understand that the property owner, a designated representative, or I need to be present at the scheduled meeting. If there is not a representative at the scheduled meeting, the agenda item will be tabled until the next regularly scheduled meeting. If all of the required material is submitted by \_\_\_\_\_, your scheduled meeting date will be \_\_\_\_\_ and \_\_\_\_\_.

I, being the owner of the property, state the taxes on the above property have been paid and are not delinquent.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Signature of Owner, Agent, Executive Director

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**SECTION 2: STAFF CHECKLIST**

- Receipt Number \_\_\_\_\_
- Filing Fee/Date \_\_\_\_\_
- Plat and/or Site Plan **(REQUIRED ON ALL CASES)**
- "Notification Area" Names & Address from Jack County Appraisal District
- Notifications Letters Sent \_\_\_\_\_
- Agenda Posting Date \_\_\_\_\_
- P & Z Date \_\_\_\_\_
- P & Z Publication Date \_\_\_\_\_
- City Council Date \_\_\_\_\_
- C.C. Publication Date \_\_\_\_\_