

CITY OF SEGUIN
ZONING CHANGE APPLICATION

State law requires that a zoning change application must be reviewed by City staff, the Planning Commission and City Council and that certain public notices be mailed and posted. This process generally takes 6 - 8 weeks. Acceptance of this application is not approval of the zoning change.

_____ Signature of Applicant _____ Date

Applicant(s) _____

Applicant's Mailing Address _____

Applicant's Phone _____

Property Owner(s) of Record _____

Owner's Mailing Address (If different from applicant) _____

Address or General Location of Property _____

Legal Description (If platted, respond here; if not platted, use attachment as noted below) _____

Property Size _____ Acres and/or _____

Floodplain Yes No

Floodway Yes No

Existing Land Use _____

Proposed Land Use _____

Existing Zoning Designation _____

Proposed Zoning Designation _____

Reasons for, or explanation of, requested zoning change _____

Has a previous zoning change request for the same classification on the same property been considered within the last 12 months?

Yes No

Attached are the following:

- (1) **\$250.00** Application Fee (Non-Refundable).
- (2) If not platted, a metes and bounds legal description of the subject property. If the zoning change involves more than one proposed designation, include a separate metes and bounds description for each different portion.
- (3) Agent's Affidavit (If applicable).

PLANNING DEPARTMENT'S USE ONLY

Accepted by _____ Date _____ ZC _____ - _____

Public Hearing Date _____

Date Notices Mailed _____

Zoning Commission Recommendation _____

Vote _____

Date Forwarded to City Attorney _____

Date Forwarded to City Secretary _____

Date of City Council Consideration _____

Date Notices Mailed _____

City Council Action _____

Ordinance Number _____ Date of Ordinance _____