

CITY OF SMITHVILLE

PLANNING & ZONING APPLICATION

APPLICATION TYPE

Zoning Change Request: Change in Zoning Class
 Change in Ordinance
 Variance
 Special Exception Use
 Minor Plat/Subdivision
 Other _____

Number of Requests: Single
 Multiple

PROPERTY IDENTIFICATION

Street Address _____

**** Applicant must submit an accurate location map and site plan for application to be considered ****

Legal description Platted Land (please provide subdivision, block and lot information below)
 Unplatted Land (please submit the metes and bounds description from deed)

Subdivision Name: _____

Property Tax Code: _____ Block Number: _____ Lot Number: _____

Property Owner
(as listed on Deed): _____

Property Owner
Mailing Address: _____

Owner's Phone No: _____ Owner's Email: _____

Agent's Name
(if applicable): _____

Agent's Mailing
Address: _____

Agent's Phone No: _____ Agent's Email: _____

DESCRIPTION OF VARIANCE / EXCEPTION REQUEST

Current Zone Class:	SF-1	<input type="checkbox"/>	SF-2	<input type="checkbox"/>	Proposed Zone Class:	SF-1	<input type="checkbox"/>	SF-2	<input type="checkbox"/>
	MR	<input type="checkbox"/>	C-1	<input type="checkbox"/>		MR	<input type="checkbox"/>	C-1	<input type="checkbox"/>
	C-2	<input type="checkbox"/>	C-3	<input type="checkbox"/>		C-2	<input type="checkbox"/>	C-3	<input type="checkbox"/>
	MHS	<input type="checkbox"/>	MF	<input type="checkbox"/>		MHS	<input type="checkbox"/>	MF	<input type="checkbox"/>
	CF	<input type="checkbox"/>	PD	<input type="checkbox"/>		CF	<input type="checkbox"/>	PD	<input type="checkbox"/>
	PD-Z	<input type="checkbox"/>	I	<input type="checkbox"/>		PD-Z	<input type="checkbox"/>	I	<input type="checkbox"/>
	CBD	<input type="checkbox"/>	PD-Z	<input type="checkbox"/>		CBD	<input type="checkbox"/>	PD-Z	<input type="checkbox"/>

Describe variance requested:

Describe special use requested:

Reason for Request:
(explain why special exception is sought or why a variance has been requested)

PETITION

As Owner/Agent, I hereby petition the City of Smithville for approval of the above described request as provided by the laws of the State of Texas and Ordinances of the City. I understand and agree that the Petition fee is non-refundable and that I must attend the Planning & Zoning meeting and subsequent City Council meeting in order for my application to be considered for approval.

Signature: _____ Date: _____

OFFICE USE ONLY:

Fee Amount: _____ Fee Payment: _____

P&Z Date: _____ Council Date: _____

Accepted By: _____ Date Submitted: _____

Notice sent to property owners within 200 feet of proposed property