



## APPLICATION & CHECKLIST – ZONING CHANGE

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\_\_\_\_\_  
(Name of Owner)

\_\_\_\_\_  
(Submittal Date)

### INSTRUCTIONS:

- Fill out the following application and checklist completely prior to submission.
- Place a check mark on each line when you have complied with that item.
- Use the most current application from the City's website at [www.city@uhlandtx.us](http://www.city@uhlandtx.us) or at City Hall. City ordinances can be obtained from the City of Umland.

Requested item for submittal package:

- \_\_\_ 1. Completed application form with owner's original signature
- \_\_\_ 2. Letter explaining the reason for the request
- \_\_\_ 3. Application fee: See Fee Schedule Sec. 5. Zoning
- \_\_\_ 4. A map or plat showing the area being proposed for rezoning
- \_\_\_ 5. A clear and legible copy of field noted (metes and bounds) describing the tract
- \_\_\_ 6. Certified Tax certificates: County \_\_\_ School \_\_\_ City \_\_\_
- \_\_\_ 7. Copy of Deed showing current ownership

\*\*a submittal meeting is required. Please contact Karen Gallaher at 512-398-7399 to schedule an appointment.

### 1. Zoning Request

Current Zoning Classification: \_\_\_\_\_

Proposed Zoning Classification: \_\_\_\_\_

Proposed use of the Property: \_\_\_\_\_

Acreage/sq. ft. of Zoning \_\_\_\_\_

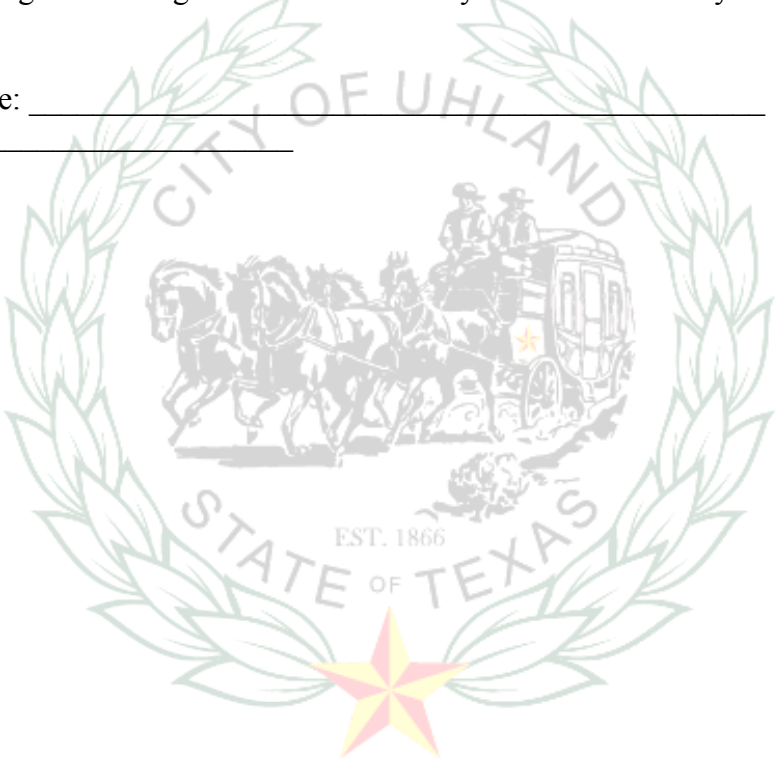


**4. Agent Information:**

Agent's Name: \_\_\_\_\_  
Agent's Address: \_\_\_\_\_  
Agent's Phone Number: \_\_\_\_\_  
Agent's Fax Number: \_\_\_\_\_  
Agent's Mobile Number: \_\_\_\_\_  
Agent's Email Address: \_\_\_\_\_

I hereby authorize the person named above to act as my agent in processing this application before the Planning and Zoning Commission and City Council of the City of Uhlend.

Owner' Signature: \_\_\_\_\_  
Date: \_\_\_\_\_



**Do Not Write Below This Line  
Staff Will Complete**

Tax Certificates: \_\_\_County \_\_\_School \_\_\_City

Certified List of Property Owners Within 200’

All Fees Paid: \_\_\_Filing/Application \_\_\_Mail Out Costs

Attached Map of Subject Property \_\_\_\_\_

Accepted for Processing By: \_\_\_\_\_ Date: \_\_\_\_\_

Date of Public Notification in Newspaper: \_\_\_\_\_

Date of Public Hearing Before Planning and Zoning Commission: \_\_\_\_\_

Date of Public Hearing Before City Council: \_\_\_\_\_

