

APPLICATION

A. Requesting: (One Check per Application)

- ☒ General Zoning Change
☐ Special Use Permit (SUP) * Include fully dimensioned site plan
☐ SUP Renewal
☐ On-Site Zoning Inspection

B. Description & Location of Property:

1. Lot, Block and Addition (required): Lot 6A Block 203
2. Property Address of Location (required): 901 N Harris

PRESENT ZONING	PROPOSED ZONING
CLASSIFICATION <u>C-1</u>	CLASSIFICATION <u>DBAC</u>
OVERLAY (IF APPLICABLE) _____	OVERLAY (IF APPLICABLE) _____
AREA (ACREAGE) <u>0.266</u>	AREA (ACREAGE) <u>0.266</u>
	DWELLING UNITS/ ACRE (if applicable) _____

C. Reason(s) for Request (please be specific):

Options for Building Light Commercial or Residential

D. Statement Regarding Restrictive Covenants/Deed Restrictions

I have searched all applicable records and, to my best knowledge and belief, there are no restrictive covenants that apply to the property as described in Part I(B) which would be in conflict with this rezoning request.

☒ None

☐ Copy Attached

AUTHORIZATION OF AGENT

- A. I (we), the undersigned, being owner(s) of the real property described above, do hereby authorize (please print name) Darren Kirby to act as our agent in the matter of this request. The term agent shall be construed to mean any lessee, developer, option holder, or authorized individual who is legally authorized to act in behalf of the owner(s) of said property. (Application must be signed by all owners of the subject property).

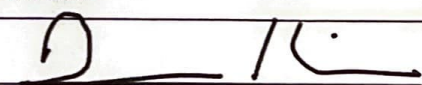
(Please print all but signature)

Owner(s) Name: Darren Kirby

Address: 18767 Falls Creek Dr

City, State, Zip: Flint, Tx 75762

Phone: 903-571-2445

Signature: 

Email: Kirbycustomhomes@gmail.com

Owner(s) Name: _____

Address: _____

City, State, Zip: _____

Phone: _____

Signature: _____

Email: _____

Authorized Agent's Name: _____

Address: _____

Phone: _____

Signature: _____

City, State, Zip: _____

Email: _____

SUPPORTING INFORMATION

- A. **PLEASE PROVIDE A MAP OF THE LOCATION TO BE REZONED**

