Z24-032

Oct. 1

CITY OF TYLER

Print Form

City of Tyler
Planning Department
423 W. Ferguson
Tyler, TX 75702
(903) 531-1175
(903) 531-1170 fax

ZONING APPLICATION

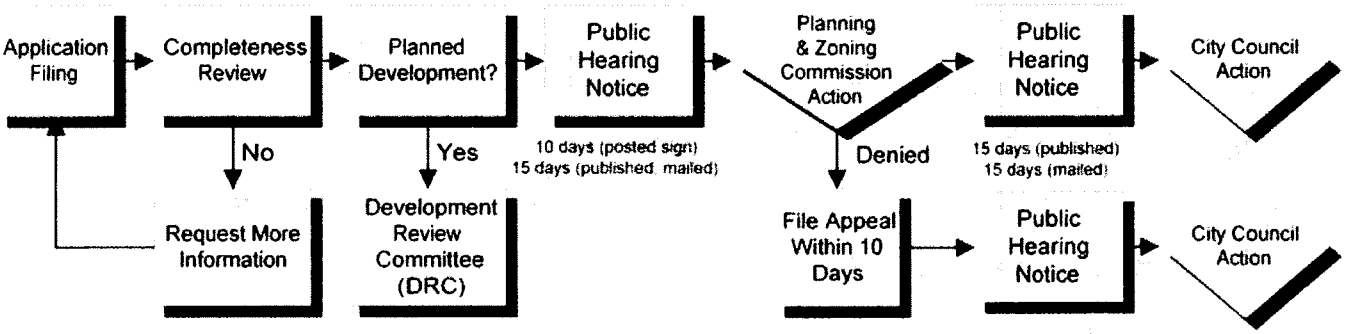
PROCESS

Reference Section 10-610
Unified Development Code

A. All zoning is by ordinance and only the City Council has the authority to adopt or to change an ordinance. The Council has assigned the study of zoning to the City Planning and Zoning Commission, which will make recommendations to the Council. If the Commission recommends a request for rezoning, it will not be effective until it is passed by the City Council. The rezoning process normally requires a period of sixty (60) days.

B. All requests must be filed in the Planning Department located at 423 West Ferguson, Tyler, TX. A filing fee must be received with the completed application form. (See Fee Schedule and Deadline Dates.) **The applicant must also post a zoning notification sign provided by the Planning Department along with a $20 refundable deposit upon return of the sign.** The sign must be placed in the front yard of the subject property no later than seven days after the application has been submitted. **If the sign is not posted in the required time frame, the application process will cease and the applicant will be required to reapply.**

C. Please have a representative present at all public hearings. The applicant has the duty to produce evidence before the Planning and Zoning Commission and City Council to justify the proposed zoning change. This generally requires a showing that conditions affecting the property have substantially changed since the last zoning classification decision of the City.



OFFICE USE ONLY

Filing Fee for Zoning Application

Receipt No.:_____Amount:_____

Sign Deposit Fee

Receipt No.:_____Amount:_____

Signed By: _____

APPLICATION

A. Requesting: (One Check per Application)

- [x] 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): 7 NCB 1537A
2. Property Address of Location (required): 5428

PRESENT ZONING	PROPOSED ZONING
CLASSIFICATION AR	CLASSIFICATION C2
OVERLAY (IF APPLICABLE)	OVERLAY (IF APPLICABLE)
AREA (ACREAGE) 0.42	AREA (ACREAGE) 0.42
	DWELLING UNITS/ ACRE (if applicable)

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

THERE IS VERY LITTLE DEMAND FOR ANTIQUES FOR THE LAST FEW YEARS, OTHER SHOPS HAVE CLOSED IN THE AREA FOR THE SAME REASON, EA ASPEN ROSE, YE OLD ANTIQUE MALL AND SO ON - . CHANGING TO A OFF ROAD ATV BUSINESS. SALES + MAINTENANCE.

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.

- [x] 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)* _____ 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: VICTOR RJESWJANSKY	Owner(s) Name:
Address: 5420 STATE HIWAY 31 W	Address:
City, State, Zip: TYLER TX 75709	City, State, Zip:
Phone: 903 343 9897.	Phone:
Signature: [signature]	Signature:
Email: SKIUNLTD@AOL.COM.	Email:

Authorized Agent's Name:	Signature:
Address:	City, State, Zip:
Phone:	Email:

SUPPORTING INFORMATION

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