

CITY OF HILLSBORO
REZONING APPLICATION

(APPLICATION FOR AMENDMENT, REVISION OR CHANGE OF THE ZONING DISTRICT MAP OF THE CITY OF HILLSBORO)

NOTE: THE REQUEST IS FINAL ONLY WHEN THE HILLSBORO CITY COUNCIL HAS TAKEN FINAL ACTION ON IT. THE APPLICANT IS CAUTIONED NOT TO MAKE ANY FINANCIAL OR LEGAL COMMITMENTS TO THE PROPERTY UNTIL FINAL DISPOSITION OF THE REQUEST.

DATE: _____ FILE NO. _____

PROPERTY DESCRIPTION: _____

LEGAL DESCRIPTION _____

LOT _____ BLOCK _____ STREET NO. _____ STREET _____

FRONTAGE IN FEET _____ ON _____ STREET. DEPTH IN FEET _____

AREA IN ACRES: _____

PRESENT ZONING CLASSIFICATION: _____ PROPOSED ZONING: _____

PRESENT USE: _____

PROPOSED USE: _____

REASON FOR REQUEST: _____

SETBACKS, YARDS, PARKING SPACES, ETC., PROPOSED _____

_____ (PLANS MAY BE ATTACHED)

ARE THERE DEED RESTRICTIONS WHICH WOULD PREVENT THE PROPERTY BEING USED IN THE MANNER HEREIN

PROPOSED? _____



OWNER'S NAME: _____

OWNER'S ADDRESS: _____

CITY, STATE, ZIP: _____ PHONE: (____) _____

REPRESENTATIVE'S NAME: _____

REPRESENTATIVE'S ADDRESS: _____

CITY, STATE, ZIP: _____ PHONE (____) _____

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The rezoning application must be completed along with the following required information:

- _____ (1) A notarized letter from the property owner authorizing a representative to present the request, if the property owner will not be presenting the request.
- _____ (2) A plat, map, sketch or drawing that clearly indicates the location and dimensions of the property, including the layout of existing structures.
- _____ (3) Must provide a copy of a notarized Warranty Deed showing proof of ownership to the property and the volume and page number it was filed on at the County Court House, a copy of a certified Survey, and a tax certificate from the Tax Assessor's Office of Hill County.
- _____ (4) Application fee of \$325.00. In the event the application is withdrawn prior to the mailing of required written notification or publication in a newspaper, the fee shall be refunded.

I attest that the above information is true and correct to the best of my knowledge that I am now or will be fully prepared to present the above proposal at the Planning & Zoning Commission hearing thereon. I understand that if any of the above information is found to be wrong or inaccurate that my application may be removed from consideration prior to the time the application is voted upon by the governing body of the City.

I understand that in the event the undersigned is not present or represented at the public hearing the Zoning Commission shall have the power to dismiss this proposal either at the call of the case or after hearing and such dismissal shall constitute a denial by both the Zoning Commission and the City Council.

I reserve the right to withdraw this proposal. However, written withdrawal filed at any time after the giving of notice of the Zoning Commission hearing shall constitute a denial by the Commission and City Council.

Attesting to inaccurate or false information on this zoning application can result in conviction of a misdemeanor and fine not to exceed \$2,000.

SIGNATURE OF PROPERTY OWNER _____ DATE _____

SIGNATURE OF REPRESENTATIVE _____ DATE _____



FEE \$325.00 DATE PAID _____ RECEIVED BY _____

SET FOR P&Z AGENDA _____

SET FOR COUNCIL AGENDA _____