

**Universal Development
Application**



Community Development
104 W. Hird Street
Gainesville, Texas 76240
(940) 668-4799 | cs@cotx.org

APPLICATION TYPE

Please check the appropriate box below to indicate the type of application you are requesting.

- | | | | |
|---|--|--|--|
| <input type="checkbox"/> Annexation Petition | <input type="checkbox"/> Planned Development | <input type="checkbox"/> Site Plan | <input type="checkbox"/> Plat Vacation |
| <input type="checkbox"/> Final Plat | <input type="checkbox"/> Preliminary Plat | <input type="checkbox"/> Sign Variance | |
| <input type="checkbox"/> Special Use Permit (SUP) | <input type="checkbox"/> Zoning Variance (BOA) | <input type="checkbox"/> Zoning Change | |

* See appropriate checklist and fee schedule for minimum requirements for each application.

PROJECT INFORMATION

Project Name:			
Project Address (Location):			Parcel(s) Tax ID#:
Existing Zoning:	Proposed Zoning:	Lots:	Gross Acres:
Subdivision/Survey:		Lot/Tract:	Abstract/Block:
Existing Use:		Proposed Use:	
Description of Proposed Use:			

APPLICANT INFORMATION

Contact Information – Owner	Contact Information – Agent/Representative
Name:	Name:
Company:	Company:
Address:	Address:
Phone:	Phone:
Email:	Email:

PROPERTY OWNER CONSENT/AGENT AUTHORIZATION

I certify that I am the legal owner of the above referenced property, or his/her authorized agent, and that to the best of my knowledge this is a true description of the property upon which I have requested the above checked action. I understand that I am fully responsible for the accuracy of the legal description given.

Signature: _____

Date: _____