



Please complete all information below. Incomplete applications may not be accepted by the Planning Department.

Select your application type

- | | |
|--|---|
| ☐ Alcohol Distance (\$500.00) | ☐ Downtown minor waiver (\$250.00) |
| ☐ Alley Waiver (\$300.00) | ☐ Vested rights petition (\$0.00) |
| ☐ Development standards variance (screening and landscaping, signage) (\$350) | ☐ Sidewalk waiver (\$200.00) |
| ☐ Alternative Compliance (\$200.00) | ☐ Sign variance (\$250.00) |
| ☐ Fence variance (\$250.00) | ☐ Tree removal permit (application fee only; tree mitigation fees required as applicable) (\$150.00) |
| ☐ House Conversion (\$800.00) | |

Reason for request:

Property Address: _____
 (If no address is available then provide a general location.)

Subdivision Name: _____ Block: _____ Lot: _____

Metes and Bounds: _____ Pre-Submittal#: _____

Total Acreage: _____ Existing Zoning District: _____

Property Owner (name or entity): _____ Owner Contact Name: _____

Owner Address _____ City: _____ State: _____ Zip: _____

Owner Email: _____ Office/Cell Phone: _____

Applicant/ Agent (name or entity): _____ Contact name: _____

Contact Address: _____ City: _____ State: _____ Zip: _____

Contact Email: _____ Office/Cell Phone: _____

NOTE: All applications are required an Acknowledgement Sheet on page 2 of this application. Otherwise, the Planning Department may reject this application.

Case # _____ Receipt # _____ Fee Amount: _____



Acknowledgments

I understand that all required information and plans must be submitted with this application or the application be deemed incomplete as per Section 1.16 of the Garland Development Code

I understand the requirements of the zoning classifications as stated in the Garland Development Code related to this request and will comply with all necessary requirements of the City codes. I am aware that the City Council has the power to zone land as most appropriate in their wisdom, to promote the health, safety, and morals and for the protection and preservation of places of historical or cultural importance, and the general welfare of the community.

The City of Garland will not accept any application for rezoning if property taxes or liens are outstanding or delinquent. Any property taxes or liens owed to the City of Garland must be paid in full prior to being accepted by the Planning Department.

It is a misdemeanor to give false information to a City employee or an agent of the City, punishable by a maximum fine of \$1,000.00.

I have read and understand this application and certify that all information and attachments are true and correct. I certify that I am the owner of the property involved in this request or have authorization to act as the owner's agent for the request described. Applicants (or a representative) are expected to be present at all public hearings concerning this application to justify and explain their request and to answer questions posed by the City Plan Commission and City Council.

Signature of Current Property Owner _____ Date _____

BEFORE ME, the undersigned authority, on this day personally appeared _____,
(printed owner name)

known to me to be the person whose name is subscribed to the foregoing instrument _____ and
(printed notary name)

acknowledged to me that they executed the same for the purposes and consideration and under the authority therein expressed.

GIVEN under my hand and seal of office this _____ day of _____, 20____.

Signature of Notary: _____

Notary Public for and in the State of Texas

My commission expires: _____

Signature of Applicant/Agent _____ Date _____

BEFORE ME, the undersigned authority, on this day personally appeared _____,
(printed applicant/agent name)

known to me to be the person whose name is subscribed to the foregoing instrument _____
(printed notary name)

and acknowledged to me that they executed the same for the purposes and consideration and under the authority therein expressed.

GIVEN under my hand and seal of office this _____ day of _____, 20____.

Signature of Notary: _____

Notary Public for and in the State of Texas

My commission expires: _____

