



COMMUNITY DEVELOPMENT DEPARTMENT

3295 Bob Rogers Drive, Eagle Pass, TX 78852 • Telephone: (830) 773-7781 • Fax: (830) 773-7803
www.eaglepasstx.gov • planning@eaglepasstx.gov

SUBDIVISION APPLICATION

TYPE OF SUBDIVISION (check one):

- ☐ Preliminary Plat ☐ Final Plat ☐ Replat ☐ Amended Plat
☐ Short Form Final ☐ Vacating Plat ☐ Master Plan
-

Name of Subdivision: _____

Property Legal Description: _____

Maverick County Property Identification Number(s): _____

Location of Addition: _____

Number of Residential Lots: _____ Number of Commercial Lots: _____ Gross Acreage: _____

Number of New Street Intersections _____ Linear feet of Streets _____

Is Subdivision inside city limits? Yes ☐ No ☐; Zoning District: _____

Existing Land Use: _____

Proposed Land Use: _____

Do you propose deed restrictions? Yes ☐ No ☐ (If yes, please attach copy)

Requested Variances: _____

PROPERTY OWNER:

Name: _____

Contact: _____

Address: _____

Phone: _____

City: _____

Fax: _____

State: _____ Zip: _____

E-mail: _____

Signature: _____

Date: _____

PROPERTY OWNER:

Name: _____

Contact: _____

Address: _____

Phone: _____

City: _____

Fax: _____

State: _____ Zip: _____

E-mail: _____

Signature: _____

Date: _____

APPLICANT:

Name: _____

Contact: _____

Address: _____

Phone: _____

City: _____

Fax: _____

State: _____ Zip: _____

E-mail: _____

Signature: _____

Date: _____

SURVEYOR:

Name: _____

Contact: _____

Address: _____

Phone: _____

City: _____

Fax: _____

State: _____ Zip: _____

E-mail: _____

Signature: _____

Date: _____

ENGINEER:

Name: _____

Contact: _____

Address: _____

Phone: _____

City: _____

Fax: _____

State: _____ Zip: _____

E-mail: _____

Signature: _____

Date: _____

PRINCIPAL CONTACT: ____ Owner ____ Applicant ____ Surveyor ____ Engineer**All City communication regarding the subdivision will be directed only to the designated principal contact.**

Office Use	Received _____ By _____ ☐ Complete ☐ Incomplete Case No. _____
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STATEMENT OF APPLICANT

The information contained in this subdivision application contains true and accurate information provided to the best of my ability. I acknowledge that the City of Eagle Pass will use the information contained herein as the basis for the review of the subdivision application's conformance with the provisions of *City of Eagle Pass Code of Ordinances Chapter 23*.

I understand that the City of Eagle Pass may use third party engineering peer review services. I acknowledge and agree that I am responsible for the payment of services attributable to my project, and that the preliminary approval process or final approval process will not proceed until and unless I have provided payment for the aforementioned services.

Applicant Signature

Date

STATEMENT OF OWNER/SUBDIVIDER

I, the undersigned, hereby certify that: (1) I am the owner the land subject to this request for a subdivision; (2) I authorize _____ to act as my agent for all documents pertaining to this subdivision application; (3) the information contained in this subdivision application or accompanying information is true and correct; (4) I will advise the City in writing of any inaccurate, misleading or false statements in the subdivision application or accompanying information; (5) the City will be advised in writing of any change in ownership of the property that is the subject of this subdivision application provided the change of ownership occurs prior to the recording of the final approved plat, if any; and (6) I will liable to the City of Eagle Pass for the completion of all site improvements required by Section 23 of the City's Code of Ordinance until such time as such improvements, if any, shall have been actually completed and accepted by the city.

Owner / Subdivider Signature

Date

STATE OF TEXAS §

COUNTY OF _____ §

Before me, the undersigned authority, a notary public for the State of Texas, on this day personally appeared _____ (Name), _____ (Title) , known to me to be the person whose name is subscribed to the foregoing instrument and acknowledge to me that he executed the same for the purpose and consideration therein expressed.

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

Notary Public, State of Texas