

**COMMUNITY SERVICES DEPARTMENT**

12002 Hwy 6, Santa Fe, TX 77510

PO Box 950

Phone (409) 925-6412

gargentine@santafetx.gov**Pre-Development Application**

Applicant Name:		Applicant Mailing Address:	
Phone:		E-mail Address:	
Property Address:		Legal Description:	Subdivision: (if any)
Property Tax ID:		Lot Size:	
Current Zoning District:		Proposed Zoning District Change: (if any)	
Change of Use: (circle one) Yes No Previous Use: (if any)			
Type of Development: (circle one) New Development/ Construction or Existing Development/ Building			
Type of Use: (circle one) Residential or Commercial		Requested Commercial Use:	
Services On-Site: (circle one or more) Water Well Septic Sewer None			
Project Synopsis: (submit additional information as a separate document if necessary)			
Required Documents: • A concept, site plan or proposed subdivision plat; such plan should show the entire property with at least approximate locations of buildings, public and private rights-of-way and open spaces, planting areas, parking and loading areas, as applicable. • An aerial view to include nearby cross streets, intersections, and surrounding properties. I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not. _____ Applicant Signature _____ Date		For Office Use Only: Pre-Development Meeting: _____ Comp Plan F.L.U.P Compliant: Yes No Required Parking: _____ Required Detention: Yes No Health District Approval: Yes No TxDot Approval: Yes No Corridor Development: Yes No	

This form may be emailed, mailed, or submitted in person.