

APPLICATION FOR ZONING/VARIANCE CHANGE CITY OF ROBSTOWN, TEXAS

Please print or type all information:	DATE
APPLICANT	PHONE
MAILING ADDRESS	
AGENT OR ATTORNEY	PHONE
MAILING ADDRESS	
STATUS OR APPLICANT (If other than owner or ag which states the exact zoning/variance change an	gent or attorney, please attach written authority from owner nd his/her consent.)
OwnerTen	nantProspective Purchaser
ADDRESS OR LOCATION OF PROPERTY REQUESTIN	NG TO BE REZONED/VARIANCE:
Property Description: Lot(s)	BlockSection
	Addition
(If description is in metes and bounds, please atta	ach on a separate sheet with a plot of said property.)
PRESENT USE OF PROPERTY (If vacant, please stat	ite so):
ZONING/VARIANCE CHANGE REQUEST:	
EDOM:	
FROM:	
TO:	
PROPOSED DEVELOPMENT & REASON(S) FOR ZON	NING/VARIANCE CHANGE:
FILING FEE: Application fees are not refu deemed complete.	undable after the application has been submitted and
\$500.00 =	less than 10 acres
\$700.00 =	10 acres or more, but less than 20 acres
\$950.00 =	20 acres or more
\$500.00 =	Variance
	APPLICANT SIGNATURE

Mail in application with correct filing fee or submit in person to:

City of Robstown Planning & Zoning Commission 101 East Main St./P.O. Box 872 Robstown, TX 78380