



Application must be accurately completed and accompanied with all required materials at the time of submittal. Incomplete submittals will be returned to the applicant. City of Holland cannot guarantee a deadline extension for omitted information or materials.

The following items shall accompany the Application.

- Zoning Application Fee: Zoning Change \$350
- A Copy of the deed(s) to the subject property verifying legal ownership
- Copy of Official Survey signed and sealed by Registered Professional Land Surveyor (RPLS) that includes existing structures and any other items requesting to be demolished
- Tax Map highlighting the subject property and showing the line extending 200 feet from property
- Tax certificates or other evidence that all applicable property taxes have been paid for the subject property
- List of property owner’s names and addresses from county appraisal district ([www.bellcad.org](http://www.bellcad.org)) within 200 feet of the perimeter of the tract (include the tract being re-zoned)
- One set of mailing labels for notification of adjacent owners
- Public Hearing Signage document at end of application is signed and dated
- Letter of Intent explaining the requested zoning change. Include statements supporting request
- Contact all Utility Service Providers to disconnect services
- Other materials as appropriate (i.e. photos, drawings, plats, petitions, etc)

Physical Location of Property: \_\_\_\_\_  
(General Location – approximate distance to nearest existing street corner)

Current Legal Description of Property: \_\_\_\_\_  
(Survey / Abstract No. and Tracts; or platted Subdivision Name with Lots / Block)

Acreage: \_\_\_\_\_  
Existing Zoning: \_\_\_\_\_ Proposed Zoning: \_\_\_\_\_  
Number of Existing Lots: \_\_\_\_\_ Number of Proposed Lots: \_\_\_\_\_

Applicant / Owner’s Name: \_\_\_\_\_  
Contact Person: \_\_\_\_\_ Title: \_\_\_\_\_  
Company Name: \_\_\_\_\_  
Street / Mailing Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone: ( ) \_\_\_\_\_ Fax: ( ) \_\_\_\_\_ Email: \_\_\_\_\_

Engineer / Representative’s Name: \_\_\_\_\_  
Contact Person: \_\_\_\_\_ Title: \_\_\_\_\_  
Company Name: \_\_\_\_\_  
Street / Mailing Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Phone: ( ) \_\_\_\_\_ Fax: ( ) \_\_\_\_\_ Email: \_\_\_\_\_

**SUBMITTAL DEADLINE: 45 DAYS PRIOR TO P&Z MEETING DATE**

**APPLICATIONS MUST BE COMPLETE BEFORE THEY WILL BE SCHEDULED FOR P&Z AGENDA.** It is the applicant’s responsibility to be familiar with, and to comply with, all City submittal requirements (in the Zoning and Subdivision Ordinances, and any separate submittal policies, requirements and / or checklists that may be obtained from City staff), including the number of plans to be submitted, application fees, etc. Please contact City staff for submittal requirements.

Office Use Only: Date Rec’d: \_\_\_\_\_ Fees Paid: \$ \_\_\_\_\_ Check #: \_\_\_\_\_ Accepted By: \_\_\_\_\_

**AN ELECTRONIC PDF COPY OF ALL APPLICATION MATERIALS WILL BE REQUIRED WITH SUBMISSION.** Electronic copy must be legible and properly scaled.

**NOTICE OF PUBLIC RECORDS.** The submission of plans / drawings with this application may be subject to Chapter 552 of the Texas Government Code ("Public Information Act"), to which the applicant understands such information may be viewed, inspected, or disclosed to the general public if pursuant to the Act. Unless the applicant expressly states otherwise in writing, submission of this application (along with any associated plans or drawings) will be considered public information and disclosable in accordance with the provisions of the Act.

I hereby certify that I am the Owner, for the purposes of this application, and that all information submitted herein is complete, true, and correct to the best of my knowledge. I understand that submitting this application does not constitute approval, and incomplete applications will result in delays and possible denial.

Signed: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_

SUBSCRIBED AND SWORN TO before me, this the \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_

Notary Public in and for the State of Texas: \_\_\_\_\_

My Commission Expires On: \_\_\_\_\_

SEAL

