

DATE OF APPLICATION: ____ / ____ / ____

Applicant Information

Name:		Business Name:	
Address:			
City:		State:	Zip Code:
Telephone:		E-Mail:	

Owner Information (if different)

Name:		Business Name:	
Address:			
City:		State:	Zip Code:
Telephone:		E-Mail:	

Type of Application

<input type="checkbox"/> Comprehensive Plan Amendment	<input type="checkbox"/> Building and Site Plan Review	<input type="checkbox"/> Preliminary Plat
<input type="checkbox"/> Rezoning	<input type="checkbox"/> Sketch Plan Review	<input type="checkbox"/> Final Plat
<input type="checkbox"/> Conditional Use Permit	<input type="checkbox"/> Variance	<input type="checkbox"/> Other: _____
<input type="checkbox"/> PUD – Preliminary	<input type="checkbox"/> Appeal of Zoning Decision	
<input type="checkbox"/> PUD – Final Plan	<input type="checkbox"/> Minor Subdivision	

Project Information

Street Address:		Zoning District:
Property Identification Number(s) (PIN #s):		
Legal Description (attach if necessary):		
Description of Proposal (attach additional information if needed):		
Proposed Name of Subdivision/Development:		Number of Residential Units Proposed:

Applicant’s Statement

This application should be processed in my name. I have completed all the applicable filing requirements and, to the best of my knowledge, the documents and information I have submitted are true and correct. I agree to reimburse the City of Victoria for the costs of professional engineers and other Consultants hired by the city to review and inspect this proposal when the City is unable to do so with existing in-house staff.

Signature: _____

Date: _____

Owner’s Statement

I am the owner of the above-described property and I agree to this application.

Signature: _____

Date: _____

Please see the attached checklist(s) for a list of plans and other information that must be submitted with this application and for other important information. The checklist must be submitted with the application and the required submittals.