



**CITY OF HASLET  
ZONING CHANGE APPLICATION**

101 Main Street-Haslet, TX 76052  
(817) 439-5931 – Fax (817) 439-1606

Date: \_\_\_\_\_

*Please note that all applications must be accompanied by all supporting documentation and fees before an application is determined to be complete and ready for review.*

Currently Zoned \_\_\_\_\_

Requested Zoning Change \_\_\_\_\_

Subdivision Name \_\_\_\_\_

Section No. \_\_\_\_\_ Lot and Block No. \_\_\_\_\_

Number of Lots/Tracts \_\_\_\_\_ Number of Acres \_\_\_\_\_

Existing Land Use \_\_\_\_\_

Proposed Land Use \_\_\_\_\_

Has the proposed area been previously Platted? \_\_\_\_\_ Is Applicant seeking to Plat this property at the same time? \_\_\_\_\_

**ENGINEER/SURVEYOR INFORMATION**

Company Name \_\_\_\_\_

Address \_\_\_\_\_

Contact Person \_\_\_\_\_

Telephone No. \_\_\_\_\_ Fax No. \_\_\_\_\_

**DEVELOPER INFORMATION**

Company Name \_\_\_\_\_

Address \_\_\_\_\_

Contact Person \_\_\_\_\_

Telephone No. \_\_\_\_\_ Fax No. \_\_\_\_\_

**PROPERTY OWNER INFORMATION**

(for multiple owners – please submit information on each owner)

Name \_\_\_\_\_

Address \_\_\_\_\_

Telephone No. \_\_\_\_\_ Fax No. \_\_\_\_\_

If the property owner(s) is (are) represented by an authorized agent, please complete the following:

Agent's Name \_\_\_\_\_ Agent's Title \_\_\_\_\_

Agent's Address \_\_\_\_\_

Agent's Telephone No. \_\_\_\_\_ Fax No. \_\_\_\_\_

**OWNER CERTIFICATION**

This is to certify that \_\_\_\_\_

(when owner(s) is/are an individual(s))

The undersigned is/are the sole owner(s) of the property described above on the date of this application.

\_\_\_\_\_

Owner Signature

\_\_\_\_\_

Owner Signature

This is to certify that \_\_\_\_\_

(Owner(s) or Corporation name)

Acting by and through the undersigned, its duly authorized agent is/are the sole owner(s) of the property described above on the date of this application.

\_\_\_\_\_

Agent Signature

**Zoning Application Checklist**

Omission of any of the following items from the Zoning submission may be cause for rejection of this application.

- \_\_\_\_\_ Meeting with City of Haslet staff prior to submittal regarding proposed zoning change.
- \_\_\_\_\_ Date of meeting with City of Haslet staff \_\_\_\_\_
- \_\_\_\_\_ Completed Zoning Change application.
- \_\_\_\_\_ One (1) paper copy of a legal description to include the metes and bounds of the proposed development.
- \_\_\_\_\_ One (1) paper copy of a list of all current property owners and their respective addresses within 200 feet of the proposed zoning change.
- \_\_\_\_\_ An electronic version of all submitted documents (either on disk or thumb drive).
- \_\_\_\_\_ All required fees (\$1,000 for 0 – 5 acres; \$1,500 for greater than 5 acres).

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**For Office Use Only**

Date when the application was received \_\_\_\_\_.

Was the application complete? \_\_\_\_\_. If no, was applicant informed that the application would not be accepted? \_\_\_\_\_.

List items missing and whether applicant will resubmit \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ Date when the application was accepted as complete.

\_\_\_\_\_ Did applicant meet with Staff prior to submittal of application?

\_\_\_\_\_ Will platting be required with the proposed zoning change.

\_\_\_\_\_ Is/Are Variance(s) requested?

\_\_\_\_\_ Copy to City Secretary

\_\_\_\_\_ Copy to Planning and Zoning Secretary

\_\_\_\_\_ Copy to Director of Public Works

\_\_\_\_\_ Copy to City Engineer

\_\_\_\_\_ Received comments from City Engineer      \_\_\_\_\_ Comments to Applicant

\_\_\_\_\_ Resubmission received

\_\_\_\_\_ Resubmission distributed

\_\_\_\_\_ Notification letters sent to property owners

\_\_\_\_\_ Legal notice published in paper

\_\_\_\_\_ Planning and Zoning Meeting      \_\_\_\_\_ Approved      \_\_\_\_\_ Denied

\_\_\_\_\_ City Council Meeting      \_\_\_\_\_ Approved      \_\_\_\_\_ Denied

\_\_\_\_\_ City Ordinance Number

\_\_\_\_\_ Sent to be filed with the County