

# Zoning Application

## Development Services

146 W. McCart, Krum, TX 76249

email: [developmentservices@cityofkrum.com](mailto:developmentservices@cityofkrum.com)

o: 940.398.7302 f: 940.482.3020



**All initial submittals for a plat, plan, or rezoning application must be submitted in-person by the applicant or their designated representative.**

<b>Type of Application:</b> <i>(check the appropriate box)</i>
<input type="checkbox"/> Rezoning / Initial Zoning <i>(Non-Planned Development Zoning)</i> <input type="checkbox"/> Rezoning / Initial Zoning <i>(Planned Development Zoning)</i> <input type="checkbox"/> Specific Use Permit
<b>General Description of Request:</b> <i>(complete the following)</i>
Existing Zoning:
Proposed Zoning: <i>(Per "Items Required with Submittal" below, provide separate letter of explanation and justification for application)</i>
<b>Subject Property Information:</b> <i>(complete the following)</i>
General Location: <i>(street address if known; if not known, provide name of street fronting property and name and distance to nearest cross street)</i>
Area of Property: <i>(gross acreage to nearest one-tenth of an acre)</i>
<b>Items Required with Submittal:</b> <i>(check the appropriate boxes to indicate items submitted with application)</i>
<input type="checkbox"/> <b>Zoning Application</b> <i>(1 completed original - signed and notarized)</i>
<input type="checkbox"/> <b>Application Fee</b> <i>(see fee schedule)</i>
<input type="checkbox"/> <b>Legal Description</b> <i>(1 copy - subdivision name, lot, and block if platted; metes and bounds description if not platted)</i>
<input type="checkbox"/> <b>Explanation Letter</b> <i>(1 original – description and justification for application)</i>
<input type="checkbox"/> <b>Proposed Development Amendments</b> <i>(1 copy – required for planned development applications only)</i>
<input type="checkbox"/> <b>Concept Plan</b> <i>(required for planned development applications only; submit with separate application)</i>
<input type="checkbox"/> <b>Other Supporting Documents or Materials</b> <i>(optional)</i>

**Property Owner and Authorization** *(sign and notarize)*

Name: *(printed)*

Company Name:

Mailing Address:

Physical Address:  
*(if different than mailing address)*

City, State, Zip Code:

Telephone:	Email Address:
------------	----------------

**Check one of the following and complete:**

- I will represent the project myself; OR
- I hereby designate \_\_\_\_\_ *(printed name of project representative)*  
to act in the capacity as my agent for submittal, processing, representation, and/or presentation of this request. The designated agent shall be the principal contact person for responding to all requests for information and for resolving all issues relative to this request.

**I hereby certify that I am the record owner of the property referenced in this application and further certify that the information provided on this application is true and correct.**

Property Owner's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

State of Texas  
County of:

BEFORE ME, a Notary Public, on this day personally appeared \_\_\_\_\_ *(printed property owner's name)* the above signed, who, under oath, state the following: "I hereby certify that I am the record owner of the property owner referenced in this application and further certify that all information submitted herein is true and correct."

SUBSCRIBED AND SWORN TO before me, this the \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_.

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

**Project Representative** *(if owner designates agent, check appropriate box and complete)*

Purchaser       Tenant       Architect       Engineer       Surveyor

Other: *(specify)*

Name: *(printed)*

Company Name:

Mailing Address:

Physical Address:  
*(if different than mailing address)*

City, State, Zip Code:

Telephone:	Email Address:
------------	----------------