



# Comprehensive Plan Amendment Application

Code of Ordinances Appendix B – Development Code

Prior to submitting this application please schedule a pre-development meeting with the Planning Staff.

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

## Contact Information

Property Owner Name		Applicant Name*	
Property Owner Mailing Address		Applicant Mailing Address	
Property Owner Phone Number(s)		Applicant Phone Number(s)	
Property Owner Email		Applicant Email	

Surveyor/Engineer/Contractor	
Mailing Address	
Phone Number(s)	
Email	

## Property Information:

Lot: \_\_\_\_\_ Block: \_\_\_\_\_ Subdivision: \_\_\_\_\_

Legal Description: \_\_\_\_\_

Zoning District: \_\_\_\_\_

## Project Description:

Purpose of Plat: \_\_\_\_\_

### The applicant will submit the following with this application:

- A. All required documents listed on the Checklist
  - B. Application Fee:
 

Base:	\$150.00
GIS:	\$15.00
<b>Total:</b>	<b>\$165.00</b>
- (All checks payable to City of Marble Falls)

Office Use Only
Staff Initials _____
Date Received _____

**All information/items on the checklist of this application must be supplied at the time of submittal. If all information/items are not submitted the application will not be accepted.**

I certify that the information on this application is complete and accurate. I understand the fees and the process for this application. I understand my responsibility, as the applicant, to be present at meetings regarding this request.

\_\_\_\_\_  
Applicant's Signature Date

\*If the owner is not the applicant, the owner statement must be submitted along with this application. If there are multiple property owners participating in the application, please use the "Multiple Owners" supplemental sheet and attach all owner information and signatures.



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## Owner Statement (if applicant is not owner):

**I HEREBY CERTIFY THAT THE APPLICANT LISTED IS AN AUTHORIZED AGENT FOR ME IN MATTERS PERTAINING TO THE FILING OF THIS MINOR PLAT/MINOR REPLAT/AMENDING PLAT APPLICATION.**

\_\_\_\_\_  
Owner's Signature (notarized)

\_\_\_\_\_  
Date

**STATE OF TEXAS:**

**COUNTY OF BURNET:**

Before me, the undersigned authority, a Notary Public in and for the State of Texas, on this day personally appeared \_\_\_\_\_, Owner, known to me to be the person whose name is subscribed to the foregoing instrument and acknowledged to me that he executed the same for the purpose and considerations therein expressed.

Given under my hand and seal of office, this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

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

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



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	Checklist Items	City Staff Initials
	Completed Application	
	Owner Authorization if owner is not applicant	
	Application filing fee	
	Tax Certificate or Warranty Deed showing ownership	
	<b>Survey</b> , showing the area to be amended, sealed by a licensed surveyor : <ul style="list-style-type: none"> <li>• One (1) digital copy in PDF</li> <li>• One (1) digital copy in CAD format (NAD 1983, State Plane 4203)</li> </ul>	
	<b>Statement:</b> A statement describing the nature and operating characteristics of the proposed use, +including any data pertinent to the findings required for approval of the application.	

***All information/items on the checklist of this application must be supplied at the time of submittal. If all information/items are not submitted the application will not be accepted.***

**Additional information other than what is listed on this checklist may be required for the evaluation of the request. The planning staff will notify you if any other information is required once a preliminary review has been completed.**