

[seal]

PLANNING DEPARTMENT

CITY OF FERRIS, TEXAS 100 Town Plaza, Ferris, Texas 75125 Main: 972.544.2110 www.ferristexas.gov



DEVELOPMENT APPLICATION

| ANTICIPATED MEETING DATES: P&Z: | City Council: | |
|---|--|---|
| DATE OF PRE-APPLICATION/DEVELOP | MENT CONFERENCE (required): | |
| Subdivision/Platting: Concept Plan (opt.) Residential F Preliminary Plat Nonresidential Final Plat Short Form F Development Plat Amending PI Plat Vacation Revised Plat (check type above) | al Replat Site Plan Plat (admin.) Revised Site Plan | Other: Landscape Plan Irrigation Plan Elevation/Façade Plan Screening Wall/Fence Plan Civil/Engineering Plans Other: |
| Name of Subdivision or Project: | | |
| Physical Location of Property: | neral Location approximate distance to nearest existing str | |
| Brief Legal Description of Property (must | also attach accurate Surveyor's metes and bound | ls description with closure calcs.): |
| | rvey/Abstract No. and Tracts; or platted Subdivision Name w | |
| Acreage: Existing # of Lots/Trac | ts: Existing Zoning: | adopted PD/SUP ordinance to this application |
| | | |
| | Titler | |
| | Title: | |
| | C'ha | Status Z'su |
| | City: | |
| Phone: () Fax: (| _) Email Address: | |
| | | |
| Contact Person: | Title: | |
| | | |
| | City: | |
| Phone: () Fax: (| _) Email Address: | |
| allow time for public hearing notifications. Please contact All applications must be COMPLETE before they will with, and to comply with, all City submittal requirement checklists that may be obtained from City staff). Please of Notice of Public Records. The submission of plans/dr these items may be viewed by the general public. Unle | I be scheduled for a P&Z or City Council agenda. It is thats (in the Zoning/Subdivision Ordinances, and any separate | e applicant's responsibility to be familiar e submittal policies, requirements and/or ecord, and the applicant understands that ssion of this application (with associated |
| this application, and that all information submitt | y authorized agent of the Owner (proof of authorized herein is complete, true and correct to the best proval, and <u>incomplete applications will result in de</u> | of my knowledge. I understand that <u>elays and possible denial</u> . |
| Signed: | Title: | Date: |
| SUBSCRIBED ANI | O SWORN TO before me, this the day of | [Month], [Year]. |

[Month] Notary Public in and for the State of Texas: ______ My Commission Expires On: _____

 Office Use Only:
 Date Rec'd:
 Fees Paid:\$
 Check #:
 Receipt #:

 Development Case #
 Accepted By:
 Official Submittal Date: