

**APPLICATION FOR AMENDMENT
OF THE ZONING ORDINANCE
BEAUMONT, TEXAS**
(Chapter 28, City Codes)

TO: THE PLANNING COMMISSION AND CITY COUNCIL, CITY OF BEAUMONT, TEXAS

APPLICANT'S NAME AND ADDRESS: _____

APPLICANT'S PHONE #: _____ FAX #: _____

NAME OF OWNER: _____

ADDRESS OF OWNER: _____

LOCATION OF PROPERTY: _____

LEGAL DESCRIPTION OF PROPERTY:

LOT NO. _____ OR TRACT _____

BLOCK NO. _____ PLAT _____

ADDITION _____ SURVEY _____

NUMBER OF ACRES _____ NUMBER OF ACRES _____

For properties not in a recorded subdivision, submit a copy of a current survey or plat showing the properties proposed to be changed, and a complete legal field note description.

CURRENT ZONING DISTRICT: _____

ZONING DISTRICT REQUESTED: _____

HAS THE REQUEST BEEN MADE BEFORE? _____ IF SO, DATE: _____

ACTION: _____

SUBMIT A LETTER STATING REASONS FOR REQUEST.

ATTACH THE APPROPRIATE APPLICATION FEE:

LESS THAN 1/2 ACRE.....\$250.00
1/2 ACRE OR MORE AND LESS THAN 5 ACRES.....\$450.00
5 ACRES OR MORE.....\$650.00

I HEREBY ACKNOWLEDGE THAT THE APPLICATION IS MADE FOR THE REQUESTED DISTRICT OR A MORE RESTRICTIVE DISTRICT.

SIGNATURE OF APPLICANT: _____ DATE: _____

SIGNATURE OF OWNER: _____

PLEASE TYPE OR PRINT AND SUBMIT TO:

PLANNING DIVISION, ROOM 201
CITY HALL, 801 MAIN STREET
BEAUMONT, TX 77701
P.O. BOX 3827 77704
(409) 880-3764
FAX (409) 880-3133

FILE NUMBER: _____
DATE RECEIVED: _____
RECEIPT NUMBER: _____