



**Zone Change/Planned District
Amendment/Site Plan Approval**

Project Number: _____

Case Number: _____

Applicant <i>(if acting as Agent, see affidavit on page 2)</i> Printed Name:		Phone () Email	
Address	City	State	Zip

Property Owner Printed Name:		Phone () Email	
Address	City	State	Zip

Representative <i>(if different from Applicant or Property Owner)</i> Firm: _____ Printed Name:		Phone () Email	
Address	City	State	Zip

Street Address: _____

Legal Description
Lot: Block: Subdivision: _____

Current Zoning: _____	Proposed Zone: <i>(List by tracts if more than one district is requested)</i>
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Reason for Zone Change Request: _____

Present Use of Property: _____

Proposed Use of Property: _____

How would this zone change affect the public health, safety and welfare? _____

Describe how conditions affecting the property have changed since present zoning designation: _____

Submittal and Fees
Items to be submitted with this application form:

- Application Fee – Payable to the ‘City of Midland’
- Dimensioned Site Plan
- Digital Copies of Site Plan (PDF/JPEG)

Signature <i>(by property owner only – authorized agent must sign affidavit below)</i>	
Applicant (signature):	Date:
Applicant (printed):	
Property Owner (signature):	Date:
Property Owner (printed) : _____	
<p><i>The Zone Change/Planned District Amendment/Site Plan Approval shall be considered officially received in the Planning office only when it has been submitted in full compliance with the provisions of Section 212 of the Texas Local Government Code and the Zoning Code of Ordinances of the City of Midland and when such required items for the application are also received.</i></p> <p><i>All materials, including exhibits, submitted in support of an application, or displayed during a public hearing, shall remain the property of the City of Midland.</i></p>	

STATE OF TEXAS
COUNTY OF MIDLAND

Before me, the undersigned authority, on this day personally appear _____ who, being by me duly sworn, upon oath says: That (s)he is the owner of _____ or authorized by _____, the owner of the above described property, to fully represent him/her in this application and that (s)he had the legal right, power and authority to sign said owner's name hereto as his/her attorney in fact.

Authorized Agent (*signature*)

Subscribed and sworn to before me, this _____ day of _____, 20____, to certify which witness my hand and seal of office.

NOTARY PUBLIC, MIDLAND COUNTY, TEXAS

FOR OFFICE USE ONLY	
<input type="checkbox"/> Property Owner Authorization	<input type="checkbox"/> Dimensioned Site Plan
<input type="checkbox"/> Application Fee	<input type="checkbox"/> Plans in Digital Format (PDF/JPEG)
Check # _____	
Received By: _____	Date: _____

****Application will not be considered for scheduling until reviewed by a planner.****