



City of Jarrell  
 161 Town Center Blvd.  
 Jarrell, Texas 76537  
 Fax (512) 746-4593  
[www.cityofjarrell.com](http://www.cityofjarrell.com)

Project Name: \_\_\_\_\_

Submittal Date: \_\_\_\_\_

# ZONING CHANGE /VARIANCE/CONDITIONAL USE

## APPLICATION & CHECKLIST

**INSTRUCTIONS**

- Fill out the following application and checklist completely prior to submission.
- Use the most current application from the City's website ([www.cityofjarrell.com](http://www.cityofjarrell.com)) or at City Hall.
- City ordinances can be obtained at City Hall or by emailing the City Secretary at [secretary@cityofjarrell.com](mailto:secretary@cityofjarrell.com).

**REQUIRED ITEMS FOR SUBMITTAL PACKAGE:**

- \_\_\_ 1. Completed application form with owner's original signature.
- \_\_\_ 2. a. Tax map(s) highlighting the subject property and showing the line extending 200 feet from property.  
 b. List of property owners names and addresses from the county appraisal district ([www.wcad.org](http://www.wcad.org)) within 200 feet of the perimeter of the tract (include the tract being re-zoned) and  
 c. One set of mailing labels for notification of adjacent owners from (b) above.
- \_\_\_ 3. The Public Hearing Signage document at the end of this checklist is signed and dated.
- \_\_\_ 4. Letter of intent explaining requested zoning change. Include statements supporting request.
- \_\_\_ 5. Field notes, dimensioned map or subdivision name with lot and block describing all proposed zoning districts.
- \_\_\_ 6. Prepare an 8½" x 11" hard copy color map including the area of the requested zoning change and surrounding areas within 1,000'. The zoning map can be found at [www.cityofjarrell.com](http://www.cityofjarrell.com) under community development tab. Draw the boundary of your request on the maps with a black marker and label the zoning district(s) requested.
- \_\_\_ 7. A physical description of the property including slopes or other topographic conditions, tree cover (extent and type), waterways, existing structures and any unique features of the site.
- \_\_\_ 8. Copy of the deed showing current ownership.
- \_\_\_ 9. Tax certificates or other evidence that all applicable property taxes have been paid for the subject property.
- \_\_\_ 10. Rezoning Fees (calculation listed below).

**FILING FEE CALCULATION:**

Filing Fee:	\$ 350.00
\$175.00 (Variance)	+ \$ _____
\$175.00 (Conditional Use)	+ \$ _____

**Staff Use Only:** Check No. \_\_\_\_\_ Additional Check No. \_\_\_\_\_

**TOTAL FEE (due at the time of application submission):** \$ \_\_\_\_\_

**PROPERTY INFORMATION:**

Property Address: \_\_\_\_\_ Property Acreage: \_\_\_\_\_  
Legal Description: \_\_\_\_\_ County Short ID#: \_\_\_\_\_  
**CURRENT ZONING:** \_\_\_\_\_ **PROPOSED ZONING:** \_\_\_\_\_

**APPLICANT INFORMATION:**

**Please Note:** The signature of owner authorizes City of Jarrell staff to visit and inspect the property for which this application is being submitted. The signature also indicates that the applicant or his agent has reviewed the requirements of this checklist and all items on this checklist have been addressed and complied with. The agent is the official contact person for this project and the single point of contact. All correspondence and communication will be conducted with the agent. If no agent is listed, the owner will be considered the agent.

**(Check One):**

\_\_\_ I, the owner, will represent this application with the City of Jarrell.  
\_\_\_ I, the owner, hereby authorize the person named below to act as my agent in processing this application with the City of Jarrell.

**OWNERSHIP INFORMATION:**

**Property Owner:** \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
*(If property ownership is in the name of a partnership, corporation, joint venture, trust or other entity, please list the official name of the entity and the name of the managing partner.)*

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Email: \_\_\_\_\_ Mobile: \_\_\_\_\_ Pager: \_\_\_\_\_

*I hereby request that my property, as described above, be considered for rezoning and I give City Staff and elected or appointed representative's permission to visit the site described in this application:*

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

**AGENT INFORMATION:**

If an agent is representing the owner of the property, please complete the following information:

**Project Agent:** \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Email: \_\_\_\_\_ Mobile: \_\_\_\_\_ Pager: \_\_\_\_\_

*I hereby authorize the person named above to act as my agent in processing this application:*

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

*I hereby attest that I prepared this application/checklist and that all information shown hereon is correct and complete to the best of my knowledge.*

\_\_\_\_\_  
Signature Name (printed) Date

**Do Not Write Below – Staff Use Only**

Accepted for Processing by: \_\_\_\_\_ Date: \_\_\_\_\_  
Date of Public Hearing before Planning & Zoning Commission: \_\_\_\_\_ City Council: \_\_\_\_\_

# PUBLIC HEARING SIGNAGE REQUIREMENTS

I \_\_\_\_\_ AGREE TO POST PUBLIC NOTICE SIGNAGE IN ACCORDANCE WITH THE FOLLOWING RULES (AN AFFIDAVIT IS ENCLOSED).

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Name (printed)*

\_\_\_\_\_  
*Date*

The applicant is required to place notification signs on the property in question notifying the public of the dates and times of the Planning & Zoning meeting and the City Council meeting. These signs must be visible on the property for both meetings. Signs must be placed on the property at least 15 days prior to the meeting dates, but not more than 30 days prior to the first meeting and shall remain until after the last public meeting date.

The yellow public hearing signs are to be posted on the subject property adjacent to all roadways at each corner of the development and at intervals not to exceed 300 feet.

Please write the following information on the yellow signs in black, waterproof ink with letters a minimum of 1-1/2" tall, approximately 3/8 of an inch thick, and legible.

**Proposed**

**'PROJECT TYPE'**

**(i.e. Concept Plan, Preliminary Plat, Re-Zone, Special Use Permit, Variance)**

**FOR**

**'PROJECT NAME & FILE # – SPECIFIC REQUEST'**

**PUBLIC HEARING**

**DATES/TIMES: \_\_\_\_\_**

The owner or owner's agent is required to sign the attached affidavit indicating that signs will be posted in accordance with these Public Hearing Signage Requirements. Staff will check to determine if the signage is posted in accordance with requirements. Failure to post public hearing signage in accordance with requirements will result in invalid public notice and the applicant will be required to pay for new public notices, letter notices and signage fees and proceed through the notification again.

*Do Not Write Below – Staff Use Only*

**SIGNS ARE TO BE POSTED NO EARLIER THAN: \_\_\_\_\_**

**SIGNS ARE TO BE POSTED NO LATER THAN: \_\_\_\_\_**

**PLANNING & ZONING MEETING IS: \_\_\_\_\_**

**CITY COUNCIL MEETING IS: \_\_\_\_\_**