



Date of Application: _____

Re-Zone Filing Fee: **\$250.00**

Date Paid: _____

Receipt Number: _____

____ Variance from Zoning Requirements

____ Appeal from Decision of Administrative Official

Application for Variance

I, the undersigned owner or authorized agent of the following described property located in the City of Mount Pleasant, Texas, hereby make application to request a variance from the terms of section _____ of the City of Mount Pleasant Zoning Code of Ordinances. **I understand that by typing my name I am signing this legal document**

Lot _____ Block _____ Addition _____

Address of property _____

Said property owned by _____

Explanation and reason for variance requested: _____

Signed:

Applicant

Applicant's Address _____

City _____ State _____ Zip _____

Phone _____

AUTHORIZATION BY OWNER TO APPLICANT

STATE OF TEXAS §
COUNTY OF TITUS §

BEFORE ME, the undersigned authority, on this date personally appeared _____, known to me to be the person whose name is subscribed hereto and upon his oath deposed and stated:

“My name is _____ and I am a resident of _____ County, _____. I am the owner of the above described property and I hereby certify that I have given my permission to _____ to make the above Application for Variance.”

I understand that by typing my name I am signing this legal document

Owner _____

Address: _____

City State Zip _____

Pho. _____ Fax: _____

SUBSCRIBED AND SWORN TO before me on this the _____ day of _____, 20_____, by _____.

Notary Public, State of Texas