

CITY OF TYE Zoning Application

Incorporated 1954



Name and Address of Applicant

Phone Number _____

Fax Number _____

Name and Address of Current Owner

Phone Number _____

Fax Number _____

Name and Address of Previous Property Owner:
(If purchased in the last 12 months)

CURRENT LEGAL DESCRIPTION:

SUBDIVISION _____

BLOCK: _____ LOT: _____

TRACT: _____

CURRENTLY ZONED

AO – Open Ag SF Single Family MF Multi Family

C1 Local Buss. C2 General Buss. MH Mobile Home

LI Light Indust. HI Heavy Industrial

ZONING CHANGE BEING PROPOSED? _____

TOTAL NUMBER OF ACRES IN PLAN: _____

TOTAL NUMBER OF LOTS IN PLAN: _____

THE FOLLOWING IS TO BE COMPLETED ONLY IF A PERSON RATHER THAN THE OWNER IS MAKING THIS APPLICATION:

I, _____, OWNER OF THE PREVIOUSLY DESCRIBED PROPERTY, DO HEREBY CERTIFY THAT I HAVE GIVEN MY PERMISSION TO, _____ TO MAKE THIS ZONING APPLICATION.

SIGNATURE OF OWNER

ZONING APPLICATION FEE:

Reply To: 205 North Street, PO Box 369, Tye, Texas 79563-0369 * 325/692-8588 * FAX 325/692-9322

Internet address: www.cityoftye.org E-Mail address: cityoftye@yahoo.com

I HEREBY CERTIFY THAT I AM OR REPRESENT THE LEGAL OWNER OF THE PROPERTY DESCRIBED ABOVE AND DO HEREBY SUBMIT THIS ZONING APPLICATION TO THE PLANNING AND ZONING COMMISSION FOR CONSIDERATION.

DATE: _____ NAME PRINTED: _____

SIGNATURE: _____

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