City of Comanche

Name:

YES

NO

Ordinance #:

101 North Grand Comanche, Texas 76442 (325) 356.2616 www.CityOfComancheTexas.net



Contact Person:

VARIANCE - ZONING SPECIAL USE PERMIT APPLICATION \$150.00 Filing Fee

PROPERTY OWNER INFORMATION

Address:			City: State: Z		Zip:		
Phone: Fax:			Email:				
	APP	PLICANT/DEVE	ELOPER INFORI	MATION			
Name:		Contact Person:					
Address:			City:	Sta	ite:	Zip:	
Phone: Fa		ax:		Email:			
		PROPERT	Y INFORMATIOI	N			
Street Address of Pr	operty:						
Legal Description	Block/Abstract:	Lot/Tract:	Addition/S	Addition/Survey:			
Current Zoning/Use:	Proposed	Proposed Zoning/Use:					
Гуре of Developmer							
hereby certify that the orther understand the aid and the application or before the P & Z	nat a public hearing on and supporting o	g for this required	uest will not be has been revie	scheduled unt wed and accep	il the app	olication fee has be	
Property Owner Signature:			Date:	Date:			
Printed Name:			Title:	Title:			
PZ #:		hip Verified:	Taxe	es Paid:	VE	Liens Paid:	
P & Z Meeting Date:	YES	NO	YES City Council I	NO Meeting Date:	YES	S NO	
Zoning Change Annre	oved:				1		

Date Approved: