

APPLICATION & CHECKLIST – ZONING CHANGE

Zoning: MAGNOLIA RESOURCES, LLC

(Name of Owner)

4/6/17
(Submittal Date)

INSTRUCTIONS:

- Fill out the following application and checklist completely prior to submission.
- Place a check mark on each line when you have complied with that item.
- Use the most current application from the City's website at www.cityofkyle.com or at City Hall. City ordinances can be obtained from the City of Kyle.

REQUIRED ITEMS FOR SUBMITTAL PACKAGE:

The following items are required to be submitted to the Planning Department in order for the Zoning Application to be accepted.

- ☒ 1. Completed application form with owner's original signature.
- ☒ 2. Letter explaining the reason for the request.
- ☒ 3. Application fee: \$428.06, plus \$3.62 per acre or portion thereof. (99)

Newspaper Publication Fee: \$190.21

Total Fee: \$976.65

- ☒ 4. A map or plat showing the area being proposed for rezoning.
- ☒ 5. A clear and legible copy of field notes (metes and bounds) describing the tract (when not a subdivided lot).
- ☒ 6. Certified Tax certificates: County ☒ School ☒ City ☒
- ☒ 7. Copy of Deed showing current ownership.

*** A submittal meeting is required. Please contact Debbie Guerra at (512) 262-3959 to schedule an appointment.

1. Zoning Request:

Current Zoning Classification: R-1-A & R-1-2
Proposed Zoning Classification: R-1-3
Proposed Use of the Property: SINGLE FAMILY RESIDENTIAL
Acreage/Sq. Ft. of Zoning Change: 98.106

2. Address and Legal Description:

Provide certified field notes describing the property being proposed for rezoning.
Provide complete information on the location of the property being proposed for rezoning.

Street Address: BUNTON LANE
Subdivision Name/Lot & Block Nos.: _____

Property Recording Information:
Volume/Cabinet No. _____

☒ Hays County

Page/Slide No. _____

3. Ownership Information:

Name of Property Owner(s): MAGNOLIA RESERVS, LLC

(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 of Owner: 3440 RELAY FUELL, SUITE 150
SPRING, TX 77386

Phone Number: 281-705-646

Fax Number: _____

Email Number: cwrene@jailand.com

I hereby request that my property, as described above, be considered for rezoning:

Signed: _____

Date: 4-3-17

4. Agent Information:

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

Agent's Name: WADZ TODD

Agent's Address: P.O. Box 33
GEORGETOWN, TX 78627

Agent's Phone Number: 512-750-9658

Agent's Fax Number: 512-869-1073

Agent's Mobile Number: 512-750-9658

Agent's Email Number: w.todde@national-site-solutions.com

I hereby authorize the person named above to act as my agent in processing this application before the Planning and Zoning Commission and City Council of the City of Kyle:

Owner's Signature: _____

Date: 4-3-17

*Do Not Write Below This Line
Staff Will Complete*

Tax Certificates: ☐ County ☐ School ☐ City

Certified List of Property Owners Within 200' ☐

CITY OF KYLE

All Fees Paid: ☐ Filing/Application ☐ Mail Out Costs

APR 07 2017

Attached Map of Subject Property ☐

Accepted for Processing By: Libbie A. Jumper

Date: PLANNING DEPARTMENT

Date of Public Notification in Newspaper: 4/19/17

Date of Public Hearing Before Planning and Zoning Commission: 5/9/17

Date of Public Hearing Before City Council: 5/16/17