



CITY OF BENBROOK

*Community Development
P.O. Box 26569
911 Winscott Road
Benbrook, Texas 76126
817-249-3000*

**REZONING
REQUEST**

PROPOSAL TO AMEND ZONING CLASSIFICATION

I/We respectfully request adoption of the following proposed amendment to the Zoning District Map of the City of Benbrook. The following is submitted in support of this proposal.

OWNER:

Name:	Phone:
Address:	Cell Phone:
City, State, Zip:	Fax:
Contact Person:	Email:

AUTHORIZED APPLICANT/AGENT: (If not Owner Named Above)

Name:	Phone:
Address:	Cell Phone:
City, State, Zip:	Fax:
Contact Person:	Email:

PROPERTY DESCRIPTION:

Address or Location:	
Legal Description:	
Subdivision/Abstract:	Block/Abstract No.:
Lots/Tracts:	Total Land Area: (acres/sq.ft):

 A metes and bounds description and a sketch map locating property so described are attached
or
 Property is subdivided as described below

Subdivision Name:			
Block:	Lots:	Block:	Lots:
Block:	Lots:	Block:	Lots:

NATURE OF REQUEST:

Current Zoning Class:	Proposed Zoning Class:
Current Use:	Proposed Use:

REASONS SUPPORTING PROPOSALS:

Approval of proposed amendment is requested because conditions have changed substantially since the current zoning was established. Please explain (attach additional page if needed):

Empty rectangular box for providing reasons supporting proposals.

ACKNOWLEDGEMENTS:

I certify that the above information is correct and complete to the best of my knowledge and ability and that I am now or will be fully prepared to present the above proposal at the Planning and Zoning Commission hearing thereon.

I understand that in the event the undersigned is not present or represented at the public hearing, the Planning and Zoning Commission shall have the power to dismiss this proposal either at the call of the case or after hearing and such dismissal shall constitute a denial by both the Planning and Zoning Commission and the City Council.

I reserve the right to withdraw this proposal at any time, except during notice periods, upon written request filed with the Community Development Department, and such withdraw shall immediately stop all proceedings thereon; provided, however, withdraw filed at any time after the giving of notice of the Planning and Zoning Commission hearing shall constitute a denial by the Commission and City Council. I understand that the filing fee is not refundable upon withdraw of proposal.

SIGNED:

Owner: _____ Date: _____

or Agent: _____ Date: _____

Return completed application, fees, and sketch map locating the property to:

City of Benbrook
P.O. Box 26569
911 Winscott Road
Benbrook, TX 76126

Attn: Planning Department

FOR ANY QUESTIONS OR ADDITIONAL INFORMATION, PLEASE CALL 817-249-3000.

For Office Use Only

Table with 2 columns and 5 rows for office use only. Rows include: Application accepted by/Date, Checked for completeness by/Date, Application Fee Paid/Date, P&Z Agenda Item/Date of Meeting, City Council Agenda Item/Date of Meeting, and Staff Comments.