

New Business Form

DATE: _____ EMAIL: _____

NAME: _____ PHONE: _____

PROPERTY ADDRESS: _____

CITY: _____ COUNTY: _____

CURRENT OWNER: Y / N – If no, name of property owner: _____

If you are not the property owner, how are you involved? _____

Survey Platting Engineering For or platting and Engineering, please fill out as much information below as possible.

PREVIOUSLY PLATTED? Yes / No Document Number Volume/ Page of Plat: _____

Property in the City Limits? Yes / No If no, is it located in the ETJ? If yes, ETJ of what City?: _____

In or next to a flood zone? Y / N _____

WATER:

WELL? Yes/No

Water lines to the property? Y / N

WATER PROVIDER : _____

SEWER:

SEPTIC ? Yes/No - If not septic, are there sewer line to the property? Y / N

SEWER PROVIDER: _____

ELEC

Are there electric lines to property? Y / N

ELEC PROVIDER: _____

GAS:

Gas lines to the property? Y / N

GAS PROVIDER: _____

ZONING: _____ NEED ZONING CHANGED? Y / N

_____ ACRES

WHAT CLIENT WOULD LIKE TO DO WITH THE PROPERTY:
