

City of Carl's Corner

500 Cornelius Rd, Carl's Corner TX 76645 CARL'S CORNER, TEXAS 76645 Planning & C.D. Department Planning & Zoning Division

Telephone (254) 580-3524

APPLICATION FOR APPROVAL OF OPERATION PERMIT Non-Refundable Filing Fee

Must be Attached: \$ 100.00

- Street address of the Property:

- Legal Description of the Property (unless lot and block, legal description must be submitted digitally as well as written or typed)

- Parcel No.:

- On a separate sheet of paper, fully describe the activity for which you are applying for a conditional use permit. Include proposed hours of operation, expected traffic volumes, staffing levels, parking availability and any other information that would be helpful. Please do not exceed one sheet of paper. This information will be included in a letter that will be sent to all property owners within 185 feet of your property.

THE UNDERSIGNED HEREBY APPLIES FOR THE APPROVAL OF SAID CONDITIONAL USE PERMIT.

With the signing and submittal of this application, the property owner authorizes the City of Carls Corner to enter onto the subject property to collect data and other information in order to accurately prepare reports or other documentation for review by the Administration departments.

- Signature of Applicant:

- Print or type name:

Address of applicant:

Telephone

- Signature of property owner or his/her legal representative: _____

Print or type name: _____

Address of property owner or his/her legal representative: _____

Telephone number of property owner or his/her legal representative: _____

Items to be submitted with application:

1. ☐ This completed application all sections must be completed or application will be deemed invalid.
2. \$100.00 non refundable filing fee .
3. Digital copy of legal description, if required.
4. One separate sheet of paper explaining intended use of property.
5. Materials required on checklist (see back).

*Except large day care home and day nurseries

To be completed by City staff only:

Current zoning _____

Provision(s) under which applying for CUP:

Date application recvd:

Date filing fee recvd:

Staff initial: