



**ZONING AMENDMENT APPLICATION**  
**City of Baytown, Texas**

DATE: \_\_\_\_\_

ADDRESS OR GENERAL LOCATION: \_\_\_\_\_

LEGAL DESCRIPTION OF THE PROPERTY (ATTACH COMPLETE LEGAL DESCRIPTION, PLAT OR SURVEY):

SUBDIVISION: \_\_\_\_\_ BLOCK NO: \_\_\_\_\_ LOT NO(S): \_\_\_\_\_ ACRES: \_\_\_\_\_

Existing zoning district: \_\_\_\_\_ Proposed zoning district: \_\_\_\_\_

Number of lots \_\_\_\_\_ Sq. feet of use \_\_\_\_\_ Proposed Use \_\_\_\_\_

Reason(s) for the request (attach additional sheets as necessary): \_\_\_\_\_

I hereby certify that I am the owner of the above-described property for the purpose of this application. I certify that I have been informed and understand the Baytown zoning regulations.

Owner signature: \_\_\_\_\_ Owner telephone: \_\_\_\_\_

Owner printed name: \_\_\_\_\_ Owner e-mail: \_\_\_\_\_

Owner address: \_\_\_\_\_  
Street City State Zip Code

In lieu of representing this request myself as owner of the subject property, I hereby authorize the person designated below to act as my agent for the application. My designated agent shall be the principal contact person with the City.

Owner signature: \_\_\_\_\_

Agent signature \_\_\_\_\_ Agent printed name: \_\_\_\_\_

Agent telephone: \_\_\_\_\_ Agent Email: \_\_\_\_\_

Agent's address: \_\_\_\_\_  
Street City State Zip Code

Is a variance also needed: YES \_\_\_\_\_ NO \_\_\_\_\_

FOR OFFICE USE ONLY						
Case Number	Date Submitted	Notice Date	Z.C. Hearing Date	C.C. Hearing Date	Zoning Map Number	Fee Amount Paid