



Commercial Zoning Application

Planning & Development

Non-Residential, Multi-Family, or Mobile Home Development

FOR OFFICE USE ONLY

Application Date: _____ File No.: _____ Fees: \$ _____ Paid: _____
Tentative P&Z Hearing: _____ Tentative City Council Hearing: _____
Planning Area: _____ Zoning Requested: _____ City Initiated: ☐ Yes ☐ No

PROPERTY INFORMATION

STREET ADDRESS OF PROPERTY TO BE ZONED: _____, Wimberley, Texas

*New Street Addresses can be obtained by calling (512) 393-2160 HAYS COUNTY CAD PROPERTY ID #: R _____

PLEASE PROVIDE DIRECTIONS TO YOUR PROPERTY: _____

NOTE: Please clearly mark your property so it is easily identifiable.

TOTAL AREA TO BE ZONED: ACRES _____ (OR) SQ. FT. _____ **TOTAL NO. of TRACTS:** _____

PLANNING AREAS: _____ **REQUESTED ZONING CLASSIFICATION:** _____

PROPOSED USE: _____

EXISTING ZONING CLASSIFICATION(s) AND USES (if applicable): _____

OWNER'S INFORMATION

Owner's Name: _____ **Phone No.:** _____

Mailing Address: _____

Email Address: _____

REPRESENTATIVE'S INFORMATION

Representative Name: _____ **Phone No.:** _____

Mailing Address: _____

Email Address: _____

Name of Real Estate Company Involved: _____

LEGAL DESCRIPTION

Street Address: _____ **Subdivision:** _____

Block(s) _____ **Lot(s)** _____ **Plat Book:** _____ **Page Number:** _____

DEED RECORDS: (REFERENCE OF DEED CONVEYING PROPERTY TO THE PRESENT OWNER):

VOLUME: _____ **PAGE:** _____ **OF COUNTY PLAT RECORDS**

OTHER PROVISIONS

Is Property in an Overlay District? _____ Yes _____ No _____ Unknown

TYPE OF OVERLAY ZONE(S) (if applicable) _____

FLOOD PLAIN (What, if any, flood zone does your property occupy?): _____

ELECTRIC UTILITY PROVIDER: _____

WATER UTILITY PROVIDER: _____

WASTEWATER UTILITY PROVIDER: _____

HAYS COUNTY SEPTIC PERMIT NUMBER (if applicable): _____

SITE INSPECTION AUTHORIZATION

Applicant, Owner, or Applicant's authorized agent hereby authorizes the City of Wimberley representatives to visit and inspect the property for which this application is being submitted.

Date: _____ APPLICANT SIGNATURE _____

WHEN APPLICABLE:

Date: _____ AGENT SIGNATURE _____

ACKNOWLEDGMENT OF EXISTING

Subdivision Plat Notes, Deed Restrictions Restrictive Covenants and/or
Zoning Conditional Use Permits

I, the Applicant herein, have checked the subdivision plat notes, deed restrictions, restrictive covenants and/or zoning conditional use permits prohibiting certain uses and/or requiring certain development restrictions (for example, height, access, screening) on the property now being zoned on my behalf and located at: _____, and more particularly known as Lot _____, Block _____ of the _____ Subdivision.

If a conflict should result with the request, I am submitting to the City of Wimberley due to subdivision plat notes, deed restrictions, restrictive covenants and/or zoning conditional use permits it will be my responsibility to resolve it. I also acknowledge that I understand the implications of use and/or development restrictions that are a result of subdivision plat notes, deed restrictions, restrictive covenants and/or zoning conditional use permits.

I understand that if requested, I must provide copies of all subdivision plat notes, deed restrictions, restrictive covenants and/or zoning conditional use permit information, which may apply to this property.

Date: _____ APPLICANT SIGNATURE _____

WHEN APPLICABLE:

Date: _____ AGENT SIGNATURE _____

Forms & Applications October 2021

SUBMITTAL CHECKLIST

TO ENSURE THAT YOU HAVE COMPLIED WITH THE ZONING APPLICATION REQUIREMENTS, REVIEW THE FOLLOWING LIST. FAILURE TO COMPLETE THE NECESSARY STEPS CAN CAUSE A DELAY IN PROCESSING YOUR APPLICATION.

- ☐ Complete "Application for Zoning"
- ☐ Provide plat map of property to be zoned which includes all properties within 200 feet of any portion of Applicant's property; and which clearly indicates streets in surrounding area.
- ☐ Provide plat map of the specific property to be zoned.
- ☐ Provide names and addresses of property owners within 200 feet of any portion of Applicant's property.
- ☐ Provide a legal description of the property to be zoned.
- ☐ Sign/date Submittal Verification form.
- ☐ Sign/date Site Inspection Authorization form.
- ☐ Sign/date Acknowledgement Form.
- ☐ Pay Zoning Fee (this fee is based on the cost of services incurred by the City of Wimberley in reviewing, processing, and recording the zoning request).
- ☐ Applicant agrees to attend a pre-zoning conference prior to acceptance of Application.
- ☐ Applicant agrees to attend Planning & Zoning Commission hearings scheduled for Applicant's proposed zoning.
- ☐ Applicant agrees to attend City Council hearing scheduled for Applicant's proposed zoning or waives his/her rights of appearance (see below).

Related Cases, If Applicable

- | | |
|--|----------------|
| <input type="checkbox"/> Zoning | File No. _____ |
| <input type="checkbox"/> Building Permit | File No. _____ |
| <input type="checkbox"/> Subdivision | File No. _____ |
| <input type="checkbox"/> Sign Permit | File No. _____ |
| <input type="checkbox"/> Engineered construction | File No. _____ |

SUBMITTAL VERIFICATION AND/OR WAIVER OF APPEARANCE

My signature attests to the fact that the attached application package is complete and accurate to the best of my knowledge. I understand that City review of this Application is dependent upon the accuracy of the information provided and that any inaccurate or inadequate information provided by me, my firm, or representative, may delay the review of the Application.

I hereby waive my right to appear before the City of Wimberley City Council at the public hearing to be held concerning the zoning of my above-referenced property. I understand that my failure to appear allows the Council to consider my zoning request; however, if questions are raised that cannot be answered, the matter will be continued.

Date: _____ APPLICANT SIGNATURE _____

WHEN APPLICABLE:

Date: _____ AGENT SIGNATURE _____

