

INTENSITY ZONE REGULATING PLAN APPLICATION

Updated: October, 2018

Case # _____-_____-_____



CONTACT INFORMATION

Applicant's Name		Property Owner	
Applicant's Mailing Address		Owner's Mailing Address	
Applicant's Phone #		Owner's Phone #	
Applicant's Email		Owner's Email	

PROPERTY INFORMATION

Subject Property Address(es): _____

Legal Description: Lot _____ Block _____ Subdivision _____

Total Acreage: _____ **Tax ID #: R** _____

Preferred Scenario Designation: _____ **Existing Zoning:** _____

Existing Land Use(s): _____

DESCRIPTION OF REQUEST

Proposed Zoning District(s): _____

Proposed Land Uses: _____

AUTHORIZATION

I certify that the information on this application is complete and accurate. I understand the fees and the process for this application. I understand my responsibility, as the applicant, to be present at meetings regarding this request.

Filing Fee* \$1,030 plus \$50 per acre **Technology Fee** \$12 **MAXIMUM COST** \$2,512

**Existing Neighborhood Regulating Plan Included in Zoning Change Fee.*

Submittal of this digital Application shall constitute as acknowledgement and authorization to process this request.

APPLY ONLINE – WWW.MYGOVERNMENTONLINE.ORG/



CHECKLIST FOR INTENSITY ZONE REGULATING PLAN APPLICATION

The following items are requested for consideration of this application. These and additional items may be required at the request of the Department	Comments
<input type="checkbox"/> <i>Pre-development meeting with staff is recommended</i> <ul style="list-style-type: none"> • Please visit http://sanmarcostx.gov/1123/Pre-Development-Meetings to schedule 	
<input type="checkbox"/> Completed Application for Intensity Zone Regulating Plan	
<input type="checkbox"/> Copy of Subdivision Plat or Metes & Bounds	
<input type="checkbox"/> CAD file in grid for GIS integration. Projection: NAD 1983 StatePlane Texas South Central FIPS 4204 Feet	
<input type="checkbox"/> Certificate of no tax delinquency	
<input type="checkbox"/> Proof of Ownership	
<input type="checkbox"/> Lien Holder(s) Name and Mailing Address(es)	
<input type="checkbox"/> Property Owner Authorization	
<input type="checkbox"/> Documents required under Section 4.4.3.8 of the San Marcos Development Code	
<input type="checkbox"/> Filing Fee \$1,030 + \$100 per acre (\$2,500 max) Technology Fee \$12	
**San Marcos Development Code Section 2.3.1.1(C): “Every application accepted by the responsible official for filing shall be subject to a determination of completeness...the responsible official is not required to review an application unless it is complete...”	

PROPERTY OWNER AUTHORIZATION

I, _____ (owner) acknowledge that I am the rightful owner of the property located at _____ (address).

I hereby authorize _____ (agent name) to file this application for _____ (application type), and, if necessary, to work with the Responsible Official / Department on my behalf throughout the process.

Signature of Property Owner: _____ Date: _____

Printed Name: _____

Signature of Agent: _____ Date: _____

Printed Name: _____