

## APPLICATION VARIANCE

Sec. 28-23 of the Zoning Code

**PAID**  
☐ CASH ☒ CHECK ☐ CREDIT  
Memo \$1516.85 850.00

### Submittal Instructions:

- Please check all the boxes. If an item is not applicable, please note that it is not applicable (NA).
- Please submit the completed application with all supporting documentation. Applications may be submitted in person or electronically (pdf format) by e-mail. Incomplete and partial applications will not be accepted.
- For electronic submittals, please include the address of the property and the type of application in the subject line of the e-mail.

Subject Line: Address of the project/Commercial or Residential/Type of application. Example: 1000 Main Street/Commercial/Fence Permit

- The City staff is available to assist you in person at City Hall or over the phone at 979-849-4364.

### Requirement:

- ☒ Pre-Application Conference (DAWG Meeting). This is required prior to application submittal.

The application packet must be submitted with the following:

- ☒ A completed Application and checklist signed by the owner/s of the property.
- ☒ Payment of all applicable fees. Refer to Appendix B of the Administrative Development Procedures Manual. (\$500.00 Fee)
- ☒ 8 1/2 x 11 copy of the legal description (metes and bounds) of the subject parcel. If the property is platted, a copy of the plat shall be provided.
- ☒ Location/vicinity map showing the location and boundaries of the subject parcel. Indicate scale or not to scale (NTS) and provide north arrow.
- ☒ Acknowledgement that the sign posted by the City on the property fifteen (15) days prior to the public hearing will be maintained until the request is heard at the public hearing.
- ☒ Provide Tax Certificate that all taxes and obligations have been paid regarding the subject property.
- ☐ Electronic copies of the required exhibits in "PDF" format and shapefile for property boundary where applicable should be submitted in a USB flash drive or via email. n/a
- ☒ A Site Plan, fully dimensioned showing the existing property condition and the requested Variance of Sec. 28-23(t)(2) and (f) (3).
- ☒ A summary addressing the Variance criteria.

**DEVELOPMENT INFORMATION**

Project Name/Address/Location: Hope Animal Hospital / 41360 5th 288 Acreage: 0.23  
Brief Description of Project: Staff parking lot  
Is property platted? ☐ No ☐ Yes Subdivision name: \_\_\_\_\_ No. of Lots: \_\_\_\_\_  
Recordation #: \_\_\_\_\_ Parcel(s) Tax ID#: 693187  
Existing Use: n/a Proposed Use: staff parking lot  
Current Zoning: Commercial Proposed Zoning: \_\_\_\_\_  
Occupancy Type: \_\_\_\_\_ Sq. Ft: \_\_\_\_\_ Bed #: \_\_\_\_\_ Bath #: \_\_\_\_\_ Car Garage #: \_\_\_\_\_  
Water System ☐ Well ☐ Public Flood Zone: ☐ Yes ☒ No Sewer System: ☐ Septic ☐ Public

**PROPERTY OWNER INFORMATION**

Owner: Will Watson / Rachel Becker, DVM Contact Name: \_\_\_\_\_  
Address: 41360 5th 288 City/State/ZIP: Angleton, TX 77515  
Phone: 936-232-4583 Email: [REDACTED]

**APPLICANT INFORMATION**

Applicant/Developer: \_\_\_\_\_ Contact Name: \_\_\_\_\_  
Address: \_\_\_\_\_ City/State/ZIP: \_\_\_\_\_  
Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**KEY CONTACT INFORMATION**

Name of the Individual: \_\_\_\_\_ Contact Name: \_\_\_\_\_  
Address: \_\_\_\_\_ City/State/ZIP: \_\_\_\_\_  
Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**SIGNATURE OF PROPERTY OWNER OR APPLICANT (SIGN AND PRINT OR TYPE NAME)**

Signature: [Signature] Date: 7/18/25  
(Signed letter of authorization required if the application is signed by someone other than the property owner)

**\*\*\*\*\*OFFICE USE ONLY\*\*\*\*\***

DATE REC'D: \_\_\_\_\_ BY: \_\_\_\_\_  
FEES PAID: \_\_\_\_\_  
APPROVED BY: \_\_\_\_\_ DATE APPROVED: \_\_\_\_\_  
APPLICATION/PERMIT NO: \_\_\_\_\_ EXP DATE: \_\_\_\_\_

Applications shall be processed based on the City's official submission dates. When a completed application packet has been accepted and reviewed, additional information may be required by staff as a result of the review, therefore it may be necessary to postpone the proposed project and remove it from the scheduled agenda and place it on a future agenda.

**Application Fee: \$500**

**TYPE OF APPLICATION** Please check appropriate box below:

**Landuse, Policy, and Site Development**

- ☐ Annexation
- ☐ Rezoning/ FLUM Amendment
- ☐ Specific Use Permit
- ☐ Planned Development (PD)
- ☐ Amending Minor and Major Plat
- ☐ Minor Consolidation Plat
- ☐ Development Plat
- ☐ Concept Plan
- ☐ Preliminary Plat
- ☐ Final Plat
- ☐ Replat
- ☐ Construction Plans
- ☐ Special Exception
- ☐ Floodplain Development Permit
- ☒ Variance/Appeal
- ☐ On-Site Sewage Facility Permit (OSSF)
- ☐ Certificate of Occupancy (CO)
- ☐ Grading/Clearing Permit
- ☐ Site Development Permit/ Site Plan Review

**Interpretations/Verifications/Text Amendments**

- ☐ Comprehensive Plan Amendment (Text)
- ☐ Land Development Code (LDC)/Zoning Text Amendment
- ☐ Vested Rights Verification Letter
- ☐ Letter of Regulatory Compliance
- ☐ Zoning Verification
- ☐ Letter/Written Interpretation
- ☐ Legal Lot Verification

**Other Permits/Licenses/Registration**

- ☐ Commercial -New/Remodel/Addition
- ☐ Residential Building Permit 1 & 2 Family  
(New, Remodel, Addition, Patio Cover, Carport, Foundation Repair, House Leveling, Windows, New Mobile Home, Siding, Storage Building permits, Re-roof)
- ☐ Miscellaneous
- ☐ Fence
- ☐ Solar Panels
- ☐ Swimming Pool
- ☐ Demolition or Move
- ☐ Backflow/Irrigation
- ☐ Flatwork
- ☐ Electrical Permit
- ☐ Plumbing Permit
- ☐ Mechanical Permit
- ☐ Sign Permit
- ☐ Garage Sale Permit
- ☐ Master/ Common Signage Plan
- ☐ Fire Prevention Permit Form
- ☐ Right-of-Way Construction
- ☐ Pipeline Permit
- ☐ Drainage Pipe/Culvert Permit
- ☐ Roadside Banner Permit
- ☐ Mobile Home Park Registration
- ☐ Game Room Permit Form
- ☐ Grooming Facility License
- ☐ Alcohol permit
- ☐ Health Permit
- ☐ Temporary Health Permit
- ☐ Alarm Permit

121 S. Velasco, Angleton, Texas 77515  
979-849-4364 – Fax: 979-849-5561  
<http://www.angleton.tx.us>



Rachel Becker, D.V.M.

To Whom It may concern:

We are applying for this variance as we are needing additional parking for staff members only. We have been serving the community of Angleton and their pets for 5 years. We have grown at a rapid pace and now are facing the challenge of growth. With staff that we have added and customers, most days all of our parking spots are filled up. We are also now having staff members park in the grass.

A new staff parking lot would ease are parking situation and prepare us for future growth as we see more people moving to the Angleton and surrounding areas.

We would have a small entrance off Sebesta Rd. that would be crushed asphalt along with the parking lot. We also will install parking bumpers for security as well. The parking lot would go back about halfway on the empty lot and then a small walkway to the hospital. Drainage would not be an issue as there is a ditch in the front and rear of the lot and the grade can be sloped for the water to run to those 2 drainage points.

We appreciate your consideration for this project.

41360 SH 288  
Angleton TX, 77515  
P: 979-612-4673  
F: 979- 612-4670

[csr@hopeanimalhospitaltx.com](mailto:csr@hopeanimalhospitaltx.com)

**AFFIDAVIT OF AUTHORIZATION BY PROPERTY OWNER**

I swear that I am the owner of (indicate address and/or legal description)

41360 SH 288 Angleton, TX 77515

which is the subject of the attached application for land platting and is shown in the records of Brazoria County, Texas.

I authorize the person named below to act as my agent in the pursuit of this application for the platting of the subject property.

NAME OF APPLICANT: Will Watson

ADDRESS: 41360 SH 288 Angleton, TX 77515

APPLICANT PHONE # 936-232-4583 E-MAIL: wwatson@hopeanimalhospitaltx.com

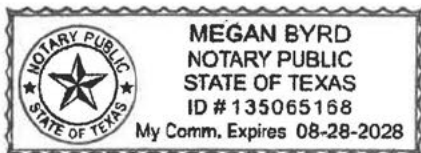
PRINTED NAME OF OWNER: Will Watson

SIGNATURE OF OWNER: [Signature] DATE: 7/15/25


**NOTARIAL STATEMENT FOR PROPERTY OWNER:**

Sworn to and subscribed before me this 15 day of July, 2025.

(SEAL)



[Signature]  
Notary Public for the State of Texas  
Commission Expires: 08-28-2028

 <b>KRISTIN R. BULANEK</b> BRAZORIA COUNTY TAX ASSESSOR-COLLECTOR 111 E. Locust Angleton, TX 77515 (979) 864-1320	<b>Tax Certificate</b> Property Account Number: <b>51790001001</b>
<b>Statement Date:</b> 07/18/2025 <b>Owner:</b> DIAMOND W REAL ESTATE LLC <b>Mailing Address:</b> 209 PLANTERS LOOP DR ANGLETON TX 775157482	<b>Property Location:</b> SEBESTARD <b>Legal:</b> HOPE COMMERCIAL PARK (A0699) (ANGLETON) BL 1 LOT 1 ACRES 0.23

TAX CERTIFICATE FOR ACCOUNT : 51790001001  
 AD NUMBER: 693187  
 GF NUMBER:  
 CERTIFICATE NO : 3501634

FEE : \$10.00  
 DATE : 7/18/2025

**COLLECTING AGENCY**

Brazoria County  
 111 E. Locust  
 Angleton TX 77515

**CURRENT VALUES 2024**

APPRAISED VALUE: 42,330  
 EXEMPTIONS:

**REQUESTED BY**

WATSON WILL

209 PLANTERS LOOP DR  
 ANGLETON TX 77515

**TAX UNIT**

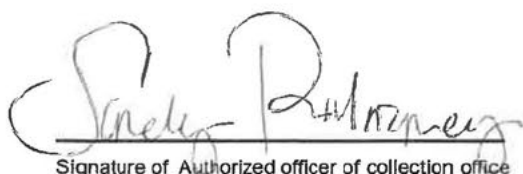
ANGLETON - DANBURY HOSPITAL
ANGLETON DRAINAGE DIST. NO 1
ANGLETON ISD
BRAZORIA COUNTY
CITY OF ANGLETON
PORT FREEPORT
SPECIAL ROAD & BRIDGE

THIS IS TO CERTIFY THAT AFTER A CAREFUL REVIEW OF THE TAX RECORDS, ALL TAXES DUE THE TAX ASSESSOR COLLECTOR OF BRAZORIA COUNTY ON THE ABOVE DESCRIBED PROPERTY HAVE BEEN PAID UP TO AND INCLUDING THE CURRENT YEAR TAXES WITH ANY ABOVE LISTED EXCEPTIONS. THE ABOVE DESCRIBED PROPERTY TAX HAS/IS RECEIVING SPECIAL VALUATION BASED ON ITS USE, AND ADDITIONAL ROLLBACK TAXES MAY BECOME DUE BASED ON THE PROVISIONS OF THE SPECIAL VALUATION. SPTB RULE 155.40 (B) PARAGRAPH 6.

ACCOUNT NUMBER: 51790001001

CERTIFICATE NO : 3501634

TOTAL CERTIFIED TAX DUE 7/2025 : \$0.00

  
 Signature of Authorized officer of collection office

7-18-25  
 Date





Total distance: 320.81 ft (97.78 m)

MS

Proposed Staff Parking Lot

