

**PAID**  CASH  CHECK  CREDIT  
 Memo *150.00*

THE HEART OF BRAZORIA COUNTY  
**ANGLETON**  
 CITY OF ANGLETON  
 SPECIFIC USE PERMIT APPLICATION

PROPERTY ADDRESS: 105 E Wilkins St, Angleton, TX 77515

PROPERTY DESCRIPTION (Legal description): Even Fixt Equip Inv Other  
Personal Property

RECORD PROPERTY OWNER NAME, ADDRESS AND PHONE NUMBER:  
Christi Beard, [REDACTED]

DESIGNATED REPRESENTATIVE, ADDRESS AND PHONE NUMBER:  
Meagan Ward, [REDACTED]

PROPOSED USE FOR THE PROPERTY ADDRESS INDICATED ABOVE:  
Cosmetic Tattoos (ie eyebrows) and Medical Tattoos (ie post mastectomy tattoos for cancer survivors)

A site plan (prepared and approved) in accordance with Section 35.4 of the City of Angleton Code of Ordinances (City Code) must be attached to the application. If a base zoning district amendment is required or requested, such rezoning application shall accompany the application for a Specific Use Permit. If the proposed use requires a division of land, an application for subdivision approval must be submitted with this application for a Specific Use Permit.

SIGNATURE: [Signature]  
 DATE: \_\_\_\_\_

PLEASE ATTACH APPLICATION

375-843-5665  
 REC#: 02296125 4/19/2024 4:26 PM  
 OPER: 3G TERM: 105  
 REF#: 063COC SUP WARD  
 TRAN: 300.0000 MISCELLANEOUS  
 MISCELLANEOUS 150.00CR  
 TENDERED: 150.00 CREDIT CARD  
 APPLIED: 150.00-  
 CHANGE: \_\_\_\_\_ 0.00

IS PROPERTY PERMIT

**APR 19 2024**  
[Signature]

ONLY  
 min Fee Received: \_\_\_\_\_  
 te to publish: \_\_\_\_\_  
 es \_\_\_\_\_ No \_\_\_\_\_  
 ed: \_\_\_\_\_

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SIGNATURE: Meagan Ward  
 DATE: 4-4-2024

PLEASE PROVIDE PROOF OF TAXES PAID ON THIS PROPERTY.

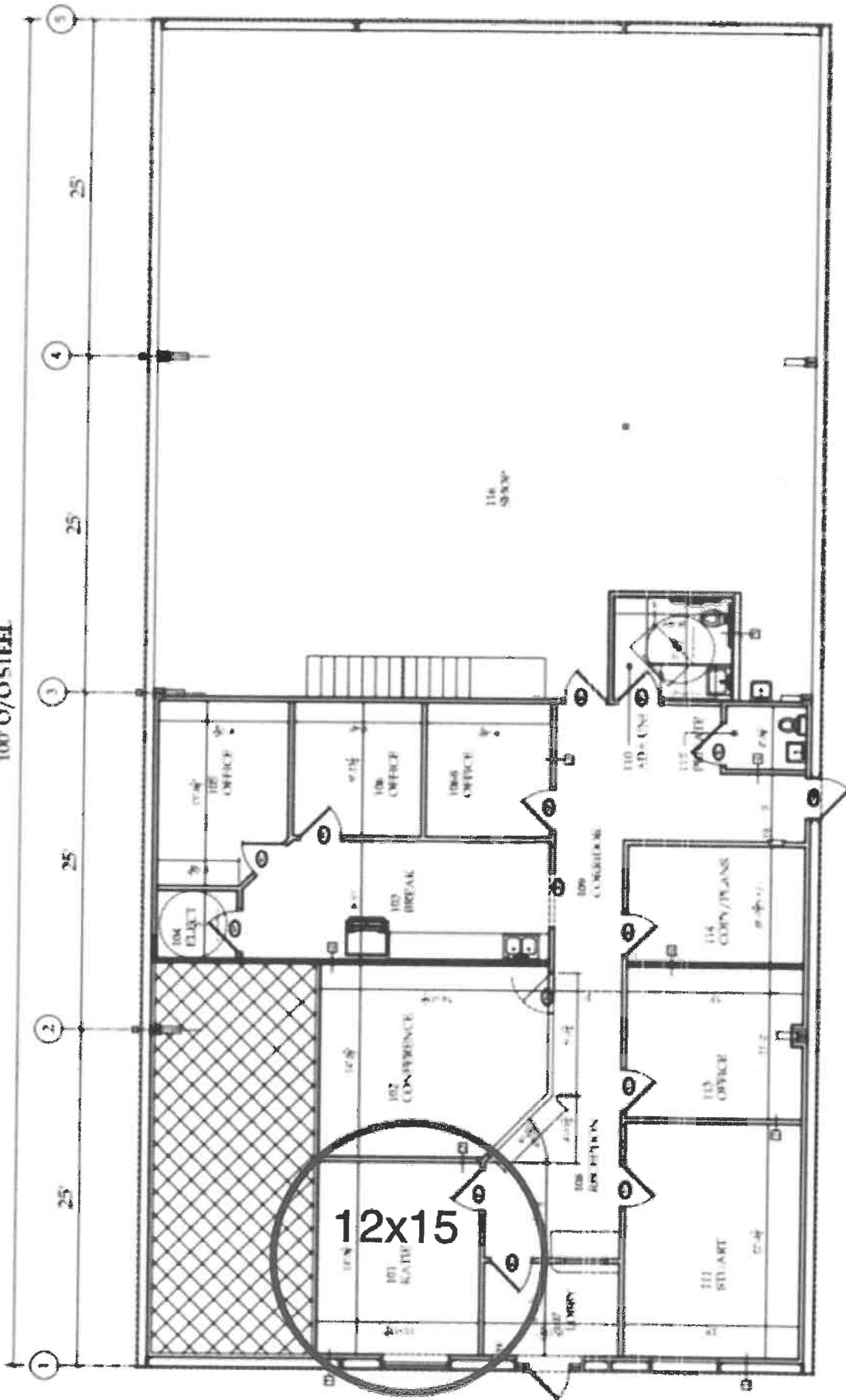
ATTACHMENT: SECTION 35 SUP – SPECIFIC USE PERMIT

APPLICATION FEE: \$150.00 due upon submittal

APR 19 2024  
 [Signature]

OFFICE USE ONLY	
Date received: _____	Admin Fee Received: _____
P&Z Public Hearing date: _____	
Date to send cert. letters: _____	Date to publish: _____
Site Plan submitted: Yes _____ No _____	
Site Plan received & evaluated by City Staff: Yes _____ No _____	
Proof of taxes paid: _____	Date verified: _____

100' O/C STEEL



FLOOR PLAN  
1/8"=1'-0"



**CITY OF ANGLETON  
APPOINTMENT OF AGENT**

As owner of the property described as 105 E Wilkins, Angleton  
I hereby appoint the person designated below to act for me, as my agent in this request.

Name of Agent: Jaime Castaneda

Mailing Address: [Redacted] Email: [Redacted]

City: [Redacted] State: [Redacted] Zip: [Redacted]

Home Phone: ([Redacted]) Business Phone: ([Redacted])

I verify that I am the legal owner of the subject property and I acknowledge and affirm that I will be legally bound by the words and acts of my agent, and by my signature below, I fully authorize my agent to:

be the point of contact between myself and the City; make legally binding representations of fact and commitments of every kind on my behalf; grant legally binding waivers of rights and releases of liabilities of every kind on my behalf; to consent to legally binding modifications, conditions, and exceptions on my behalf; and, to execute documents on my behalf which are legally binding on me.

I understand that the City will deal only with a fully authorized agent. At any time it should appear that my agent has less than full authority to act, then the application may be suspended and I will have to personally participate in the disposition of the application. I understand that all communications related to this application are part of an official proceeding of City government and, that the City will rely upon statements made by my agent. Therefore, I agree to hold harmless and indemnify the City of Angleton, its officers, agents, employees, and third parties who act in reliance upon my agent's words and actions from all damages, attorney fees, interest and costs arising from this matter. If my property is owned by a corporation, partnership, venture, or other legal entity, then I certify that I have legal authority to make this binding appointment on behalf of the entity, and every reference herein to 'I', 'my', or 'me' is a reference to the entity.

Signature of owner [Signature] Title owner

Printed/Typed Name of owner Christi Beard Date 4-11-24

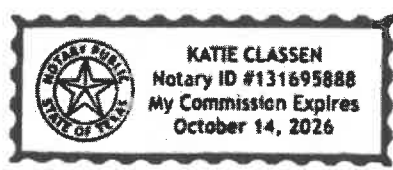
\*Application must be signed by the individual applicant, by each partner of a partnership, or by an officer of a corporation or association.

STATE OF TEXAS §  
COUNTY OF Brazoria §

Before me, Katie Classen, on this day personally appeared Christi Beard, known to me (or proved to me on the oath of NA or through Texas DL) to be the person whose name is subscribed to the foregoing instrument and acknowledged to me that he executed the same for the purpose and consideration therein expressed.

Given under my hand and seal of office this 10 day of April, 2024

(SEAL)



[Signature]  
Notary Public Signature  
10-14-2026  
Commission Expires