

OFFICE USE ONLY
Date received: Fee: \$
P&Z Public Hearing date:
Date to send cert. letters:
Date to publish:
Proof of taxes paid: date verified:

CITY OF ANGLETON RE-ZONE APPLICATION

Name(s) of Property	Owner:		.C 		
Current Address:		Email:			
City:		State:	Zip:_		
Home Phone:	Business I	Phone:	Cell:		
ATTACH PROOF T TO THE CITY OF A		FEES AND OBLI	GATIONS HAVE	E BEEN PAID	
Name of Applicant: _	Amber Carter				
		(If different than I	Property Owner)		
			Email:		
Address:					
			Zip:	77515	
City: Angle	Business I	State: Phone:	Cell:		
City: Angle Home Phone: Address/Location of	Business F Property to be Re-zo	State:TX Phone: oned:105 Cen	Cell: netery Rd, Angleton, TX 77		
City:Angle Home Phone: Address/Location of Legal Description:	Business F Property to be Re-zo	State:TX Phone: oned: 105 Cem CT 128B1- 128B2 ACRES	Cell: netery Rd, Angleton, TX 77		

Application Fee: \$150.00 (must be submitted with application)