

City of Dripping Springs MORATORIUM WAIVER APPLICATION

Official Use Only:
Proiect # MOR
Date Received

Property/Site Address or Legal Description:					
		Hays	CAD Property ID	(R #):	
Owner Name:		Phone #:		_	
Owner Email:					
Authorized Agent:					
Agent Email:					
BASIS FOR WAIVER:					
Additional Information / Submittal Require This request should be submitted simultaned plat; (3) replat; (4) zoning application including Agreement; (6) Building Permit application; will be reviewed by City Council within 10 day underlying permit; and (3) all documentation construct wastewater infrastructure). A lett City Council makes a decision on the request project substantially changes. Prior to apply will be eligible for an exception rather than a	ously with any othing Planned Devel (7) Wastewater a ays of the City reconstruction the bate on the status of the denied, a waiting for a waiting for a waiting.	lopment District application; and seiving: (1) this a sasis for the waiver wer may not be	; (5) application f (8) other land use application; (2) th ver (for example ill be provided to reapplied for unl	for Development e applications. Waivers he application for the an agreement to fund and the applicant after the ess the waiver request or	
Applicant Signature	Print Name			Date	
OFFICIAL USE ONLY:					
Date all necessary documentation received	l:	Approved:	_ Denied:	Date:	
		Ву:		11/2021	