

City of Joshua Development Services Universal Application

Please check the appropriate box below to indicate the type of application you are requesting and provide all information required to process your request.

- | | | |
|--------------------------------------------------|-------------------------------------------------------------------------|------------------------------------------------------------|
| <input type="checkbox"/> Pre-Application Meeting | <input type="checkbox"/> Comprehensive Plan Amendment | <input type="checkbox"/> Zoning Change |
| <input type="checkbox"/> Conditional Use Permit | <input type="checkbox"/> Zoning Variance (ZBA) | <input type="checkbox"/> Subdivision Variance |
| <input type="checkbox"/> Preliminary Plat | <input type="checkbox"/> Final Plat | <input type="checkbox"/> Amending Plat |
| <input type="checkbox"/> Replat | <input type="checkbox"/> Planned Development Concept Plan | <input type="checkbox"/> Planned Development Detailed Plan |
| <input type="checkbox"/> Minor Plat | <input checked="" type="checkbox"/> Other <u>Element of a site plan</u> | |

PROJECT INFORMATION

Project Name: Three Rivers Coffee Co

Project Address (Location): 107 N Main St Suite A

Existing Zoning: C1 Proposed Zoning: C1

Existing Use: _____ Proposed Use: Coffee / wine lounge

Existing Comprehensive Plan Designation: _____ Gross Acres: _____

Application Requirements: The applicant is required to submit sufficient information that describes and justifies the proposal. **See appropriate checklist located within the applicable ordinance and fee schedule for minimum requirements. Incomplete applications will not be processed.**

APPLICANT INFORMATION

Applicant: Christopher Richie Company: Richie Tech Solutions LLC

Address: 1103 Pampama Tel: 907-752-8733 Fax: _____

City: Wahalahe State: TX ZIP: 75165 Email: Chris@richietechSolutions.com

Property Owner: Kris Maddox Company: _____

Address: PO Box 516 Tel: _____ Fax: _____

City: Joshua State: TX ZIP: 76058 Email: maddox.kristopher@thermaddoxagency.net

Key Contact: Christopher Richie Company: _____

Address: _____ Tel: _____ Fax: _____

City: _____ State: _____ ZIP: _____ Email: _____

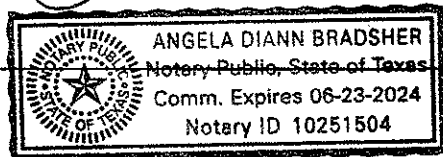
SIGNATURE OF PROPERTY OWNER OR APPLICANT (SIGN AND PRINT OR TYPE NAME)

SIGNATURE: [Signature]
(Letter of authorization required if signature is other than property owner)

Print or Type Name: _____
Known to me to be the person whose name is subscribed to the above and foregoing instrument, and acknowledged to me that they executed the same for the purposes and consideration expressed and in the capacity therein stated
Given under my hand and seal of office on this 18 day of April 2022

Angela Diann Bradsher
Notary Public

Signature: Angela Diann Bradsher Date: 4-18-22



For Departmental Use Only

Case No.: 22-00300

Project Manager: _____

Total Fee(s): 150.00

Check No.: Card

Date Submitted: 4-18-22

Accepted By: C. Austin

Date of Complete Application: _____