

PROJECT INFORMATION

Project Name				
Project Address (or location)				
Existing Zoning Proposed	Zoning Existing Land Use	Proposed Land Use	e Acreage	# of Proposed Lots
APPLICATION (check all the				
Land Use Rezoning Special Use Permit	Site Development Preliminary Site Plan Final Site Plan	Land Subd Lot Split Preliminar Final Plat		<u>Miscellaneous</u> Vacation Variance
APPLICANT & PROPERTY (DWNER INFORMATION (if mo	re than 1 property	owner, see check	(list)
Name of Applicant	Company	Phone	Email Address	
Address		City	State	Zip Code
Belton website as necessary for th information meet all UDC requirer	to copy and distribute all submitted pr e project approval process, including p nents unless specifically stated otherw rerally liable to pay the City of Belton a	public hearings. Furthe vise in an attached lett	rmore, all submitted er. Additionally, I agre	plans, materials, and ee that the Applicant and
Applicant Signature				Date
Name of Property Owner		Phone	Email Address	
Address		City	State	Zip Code
I declare under papalty of pariury	that in applying for this application. I	am the owner of this	property and that the	statements herein and all

Information herein submitted are, to the best of my knowledge and belief, true and correct. In the even of corporate ownership, all Directors, Officers, Stakeholders of each Corporation owning more than five percent (5%) of any class of stock is listed in an attached letter. With the signing and submittal of this application, I authorize the City of Belton to enter onto the subject property to collect data and other information in order to accurately prepare reports or other documentation for review by City Council, Boards & Commissions, and City staff. Additionally, I agree that the Applicant and Property Owner are jointly and severally liable to pay the City of Belton all applicable fees and costs required for the project review and approval process.

Property Owner Signature

PROJECT DESCRIPTION

PROJECT DESCRIPTION:

PROJECT CONTACTS

Please list all applicable cor	ntacts for the project:			
PRO		DEVELOPER		
Name:		Name:		
Company:		Compan	y:	
Address:	Address	:		
Email:	Phone:	Email:		Phone:

ENGINEER			ARCHITECT		
Name:			Name:		
Company:			Company:		
Address:			Address:		
Email:	Phone:		Email:	Phone:	

Name: Company: Address:

Address:

Email:

SURVEYOR				
Name:				
Company:				
Address:				
Email:	Phone:			

ATTORNEY

Phone:

	Email:	Phone:
_		
	OTHER CONTACT	
	Name:	
	Company:	

Phone:

LANDSCAPE ARCHITECT

	EOU	NOCUME	MTC 0 D	LAN SETS
1.5				

DESCRIPTION

REQUIREMENT **Legal Description Sealed Plan Set**

8 1/2" x 11" copy submitted with application + electronic copy emailed to staff See Application Checklists for each Application submitted

- **Application Specific Requirements**
- See Application Checklists for each Application submitted

APPLICATION FEES					
Residential Rezoning:	\$150	Commercial Rezoning:	\$200		
Residential Preliminary Plat:	Less than 20 lots: \$200	Commercial Preliminary Plat:	Less than 40 acres: \$300		
	+ \$10/each lot over 20 lots		+ \$10/each acre over 40 acres		
Residential Final Plat:	Less than 20 lots: \$200	Commercial Final Plat:	Less than 40 acres: \$300		
	+ \$10/each lot over 20 lots		+ \$10/each acre over 40 acres		
Preliminary Development Plan:	\$300	Lot Split:	\$150		
Final Development Plan:	\$300	Variance:	\$150		
Special Use Permit:	\$150	Vacation:	\$150		

Office Use Only:

Name: Company: Address:

Email:

Date Received: _____ Fee(s) Paid: _____ Meeting Date(s): ____