

CITY OF POST OAK BEND
APPLICATION FOR VARIANCE
OR SPECIAL USE PERMIT

Application Information:

Name: _____

Relationship to Owner of Property _____

Address: _____

Phone: _____ Email: _____

Legal Description of Property Involved (Include Lot, Block, Subdivision Name, or
CAD Tract) _____

Legal Owner of Property Involved: _____

Reason for Request: (Include type of conditional use requested, dimensions, materials
And variance to code) _____

If temporary request, please provide dates _____, and sign promise to remove by _____.

Signature of Legal Owner of Property _____ Date _____

Signature of Applicant _____ Date _____

City Office Use Only _____

Application Date: _____

\$250 Application Fee (includes advertising) _____ Check # _____ or Cash _____

Planning & Zoning Public Hearing (15 days prior)

P&Z Hearing Notice Published (15 days prior)

P&Z Neighborhood Notices (15 days prior)

City Council Public Hearing

City Council Notice Published (15 days prior)