



**CITY OF SOUTH PADRE ISLAND
ZONING APPLICATION**

- \$1,000 Rezoning \$1,000 Planned Development District (PDD)
 \$250 Specific Use Permit (Sec. 20-24)

SUBJECT PROPERTY: Lot(s) _____
Block(s) _____
Section(s) / Subdivision _____
Intended Use of Property: _____
Zoning District(s): _____

PROPERTY OWNER: _____

OWNER MAILING ADDRESS: _____

CITY, STATE, ZIP: _____

PHONE NUMBER: (____) _____

FAX NUMBER: (____) _____

EMAIL: _____

An authorization letter from the Property Owner will be required, if applicant is not the property owner.

APPLICANT (if different from Owner): _____

APPLICANT MAILING ADDRESS: _____

CITY, STATE, ZIP: _____

PHONE NUMBER: (____) _____

FAX NUMBER: (____) _____

EMAIL: _____

Include with this application:

- 1) Application fee
- 2) 10 copies of supporting document(s)
- 3) Stamped/sealed & dated survey
- 4) Proposed uses
- 5) Additional Information (operating the time, functions, any expected impacts)
- 6) Location of any building proposed
- 7) Design (floor and section plan) of any building proposed (if available)
- 8) Digital copy of entire packet

Signature of Applicant

Date