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Amount Paid: \$500

Cash/MO # Check #: # / 17 8 6

Receipt #: 321

CASE #: <u>215-29</u>

City of Killeen Zoning Change Application

[] General Zoning Change [メ] Conditional Use Permit

Name(s) of Property Owner: Abdul Khan
Current Address: 507 Osman Drive
City: Killeen State: TX Zip: 76542 -
Home Phone: ()Business Phone: ()Cell Phone: (25/4 681-7216
Email:
Name of Applicant:_Jason Horowitz, Killeen DTP, LLC (If different than Property Owner)
Address: 9010 Overlook Boulevard
City:_Brentwood State: TN Zip: 37027
Home Phone: ()Business Phone: (_6)15-370-0670 Cell Phone ()
Email: _jhorowitz@gbtrealty.com
Address/Location of property to be rezoned: 10752 S. Ft. Hood Street
Legal Description: Lot 1, Block 1, Wassey Addition , 1.297 acres
Metes & Bounds or Lot(s) 1Block 1 Subdivision Wassey
Is the rezone request consistent with the Comprehensive Plan? YES NO
Type of Ownership:Sole OwnershipX PartnershipCorporationOther
Present Zoning: CD/CUP Present Use: Vacant - Conditional Use Permit for 5,000 sf Convenience Store
Proposed Zoning: CD/Cup Proposed Use: 9,100 sf Retail Store
Conditional Use Permit for: 9,100 sf Reatil Store
This property was conveyed to owner by deed dated 9-23-2011 and recorded in Volume, Page, Instrument Number 201100033659 of the Bell County Deed Records. (Attached)
Is this the first rezoning application on a unilaterally annexed tract? Yes (Fee not required) No (Submit required fee)

APPOINTMENT OF AGENT

As owner of the subject property, I hereby appoint the person designated below to act for me, as my agent in this request. Name of Agent: _Jason Horowitz, Killeen DTP, LLC c/o GBNT Realty Corporation Mailing Address: 9010 Overlook Boulevard City: Brentwood 37027 State: TN Business Phone: (615) 370-0670 Email: Home Phone: (I acknowledge and affirm that I will be legally bound by the words and acts of my agent, and by my signature below, I fully authorize my agent to: be the point of contact between myself and the City: make legally binding representations of fact and commitments of every kind on my behalf; grant legally binding waivers of rights and releases of liabilities of every kind on my behalf; to consent to legally binding modifications, conditions, and exceptions on my behalf; and, to execute documents on my behalf which are legally binding on me. This authorization only applies to this specific zoning request. I understand that the City will deal only with a fully authorized agent. At any time it should appear that my agent has less than full authority to ace, then the application may be suspended and I will have to personally participate in the disposition of the application. I understand that all communications related to this application are part of an official proceeding of City government and, that the City will rely upon statements made by may agent. Therefore, I agree to hold harmless and indemnify the City of Killeen, its officers, agents, employees, and third parties who act in reliance upon my agent's words and actions from all damages, attorney fees, interest and costs arising from this matter. If my property is owned by a corporation, partnership, venture, or other legal entity, then I certify that I have legal authority to make this binding appointment on behalf of the entity, and every reference herein to 't', 'my', or 'me' is a reference to the entity. Signature of Agent Printed/Typed Name of Agent / Jason Horowitz Signature of Applicant Date Printed/Typed Name of Applicant Signature of Property Owner Date Printed/Typed Name of Property Owner Signature of Property Owner Date Printed/Typed Name of Property Owner Signature of Property Owner Printed/Typed Name of Property Owner *Application must be signed by the individual applicant, by each partner of a partnership, or by an officer of a corporation or association.

Revised 07/13/2012 2