

Date Paid: Amount Paid: Cash/MO #/Check #: Receipt #:	\$ #

CASE#: 215-36

### City of Killeen Zoning Change Application

Name(s) of Property Owner:	ABBOTT, WILLIAM H ETU	X STEPHANIE D	
Current Address: 602 REIN D	R		
City: KILLEEN	State: T	Zip: 76542-9051	_
Home Phone: ( ) N/A	Business Phone: ()	Cell Phone: (254) 258 - \_	270
- Email: Stephaniellalo	5@ amail.com		_
Name of Applicant:			
Name of Applicant:	(If different that	an Property Owner)	
Address:			
City:	State:	Zip:	
Home Phone: ()	Business Phone: (	Cell Phone ()	
Email:			
Address/Location of property to	be rezoned: 602 REIN DR	R KILLEEN, TX 76542-9051	
Legal Description: WAGON W			
	Metes & Bounds	or Lot(s) Block Sul	odivision
Is the rezone request consiste	nt with the Comprehensive F	Plan? <u>YES</u>	
Type of Ownership: X	Sole OwnershipPartner	rshipCorporation	Other
Present Zoning: R1	Present Use:RESIDENTI	AL, Single	
		ITIAL Single	
Conditional Use Permit for:		, ,	
This property was conveyed to Page (20323 , Instrument I (Attached)	owner by deed dated 3/20/7 Number 5402 5403	and recorded in Volution of the Bell County Deed	ime 02710 I Records.
Is this the first rezoning applica Yes (Fee			

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: Mailing Address: City: \_\_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Home Phone: ( \_\_\_ Business Phone: ( \_\_\_ Email: \_\_\_\_ 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 act, 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 'l', 'my', or 'me' is a reference to the entity. Signature of Agent \_\_\_\_\_ Printed/Typed Name of Agent \_\_\_\_\_ Date \_\_\_\_ Signature of Agent Title \_\_\_\_\_ Printed/Typed Name of Agent Date \_\_\_\_\_ Signature of Applicant -Printed/Typed Name of Applicant Signature of Property Owner Printed/Typed Name of Property Owner
W://(Gr) F ~ Signature of Property Owner Printed/Typed Name of Property Owner Stephanie Date 11-22-15 Signature of Property Owner Title \_\_\_\_\_

Revised October 2015

Printed/Typed Name of Property Owner

Date \_\_\_\_

<sup>\*</sup>Application must be signed by the individual applicant, by each partner of a partnership, or by an officer of a corporation or association.



Date Paid: Amount Paid: Cash/MO #/Check #: Receipt #:	\$ #
--	---------

CASE #: \_\_\_\_\_

# City of Killeen Zoning Change Application

#### [] General Zoning Change \$300.00 [] Conditional Use Permit \$500.00

	Name(s) of Property Owner: ALLEMAND, CAROLYN SUE
	Current Address: 6608 REIN DR
	City:         KILLEEN         State:         TX         Zip:         76542-9045
_	Home Phone: (254-289 Business Phone: ( _ )Cell Phone: ( _ )
	Home Phone: (254-289 Business Phone: (_) Cell Phone: (_)  5319  Email: Secret squirrel 470 gmas . com
	Name of Applicant: (If different than Property Owner)
	(If different than Property Owner)
	Address:
	City:
	Home Phone: (Business Phone: (Cell Phone ()
	Email:
	Address/Location of property to be rezoned: 6608 REIN DR KILLEEN, TX 76542-9045
	Legal Description: WAGON WHEEL SUBDIVISION, BLOCK 004, LOT 0011
	Metes & Bounds or Lot(s) Block Subdivision
	Is the rezone request consistent with the Comprehensive Plan? YES
	Type of Ownership: X Sole Ownership Partnership Corporation Other
	Present Zoning: R1 Present Use: RESIDENTIAL Single
	Proposed Zoning: SR2 Proposed Use: RESIDENTIAL Single
	Conditional Use Permit for:
	This property was conveyed to owner by deed dated 6/1/2004 and recorded in Volume 5/21.  Page 3/1, Instrument Number 28850 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)

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: Mailing Address: City: \_\_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Home Phone: ( \_\_\_ Business Phone: ( \_\_ Email: \_\_\_\_\_ 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 act, 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 '!', 'my', or 'me' is a reference to the entity. Signature of Agent \_\_\_\_\_ Printed/Typed Name of Agent \_\_\_\_\_ Date \_\_\_\_\_ Signature of Agent \_\_\_ Printed/Typed Name of Agent \_\_\_ Signature of Applicant \_\_ Carolin Sur alleman Printed/Typed Name of Applicant Carolyn Sure Allemand Date 11-3-2015 Signature of Property Owner Printed/Typed Name of Property Owner Carolun Sue Allemond -Date

\*Application must be signed by the individual applicant, by each partner of a partnership, or by an officer of a corporation or association.

Signature of Property Owner \_\_\_\_\_\_\_Title \_\_\_\_\_

Printed/Typed Name of Property Owner

Printed/Typed Name of Property Owner

Revised October 2015

Signature of Property Owner

Date \_\_\_\_\_



Date Paid: Amount Paid: Cash/MO #/Check #: Receipt #:	\$ #
--	---------

CASE	#:	

# City of Killeen Zoning Change Application

	Name(s) of Property Owner: BASSETT, RYAN M
	Current Address: 6414 WAGON WHEEL DR
	City: KILLEEN State: TX Zip: 76542-9069
per-	Home Phone: (754 449-3530) Business Phone: ()Cell Phone: ()
1/2	Email: <u>ribassette hot.rr.com</u>
	Name of Applicant: (If different than Property Owner)
	(If different than Property Owner)
	Address:
	City: State: Zip:
	Home Phone: (Business Phone: (Cell Phone ()
	Email:
	Address/Location of property to be rezoned: 6414 WAGON WHEEL DR KILLEEN, TX 76542-9069
	Legal Description: WAGON WHEEL SUBDIVISION, BLOCK 002, LOT 0016
	Metes & Bounds or Lot(s) Block Subdivision
	Is the rezone request consistent with the Comprehensive Plan? YES
	Type of Ownership: X Sole Ownership Partnership Corporation Other
	Present Zoning: R1 Present Use: RESIDENTIAL, Single
	Proposed Zoning: SR2 Proposed Use: RESIDENTIAL Single
,	Conditional Use Permit for:
	This property was conveyed to owner by deed dated 9/12/2008 and recorded in Volume
	Is this the first rezoning application on a unilaterally annexed tract?  YesX(Fee not required) No (Submit required fee)

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: Mailing Address: City: \_\_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Home Phone: ( \_\_\_ Business Phone: ( \_\_\_ Email: \_\_\_\_ 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 act, 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 'l', 'my', or 'me' is a reference to the entity. Signature of Agent \_\_\_\_\_\_\_Title \_\_\_\_\_ Printed/Typed Name of Agent \_\_\_\_\_\_\_ Date \_\_\_\_\_ Signature of Agent \_ \_\_\_\_\_\_ Title \_\_\_\_\_ Printed/Typed Name of Agent \_\_\_\_\_\_ Date \_\_\_\_\_ Signature of Applicant \_\_\_\_\_Title Owner Printed/Typed Name of Applicant Ran B Date 11-22-15 Signature of Property Owner \_\_\_\_\_\_ Printed/Typed Name of Property Owner Ryan Bessett Date 11-22-15 Signature of Property Owner \_\_\_\_ \_\_\_\_\_\_Tite \_\_\_\_\_ Printed/Typed Name of Property Owner \_\_\_\_\_\_ Date \_\_\_\_\_

<sup>\*</sup>Application must be signed by the individual applicant, by each partner of a partnership, or by an officer of a corporation or association.





Date Paid: Amount Paid: Cash/MO #/Check #: Receipt #:	\$ #
1 1000,567.	

CASE #: \_\_\_\_

# City of Killeen Zoning Change Application

#### [] General Zoning Change \$300.00 [] Conditional Use Permit \$500.00

Name(s) of Proper	ty Owner:	BAUER, GLENN R	ETUX RHON	DA L	
Current Address: _	6605 REIN	OR			
City: KILLEEN		744	State: TX	Zip:	76542-9046
చిన Home Phone: ( )	4-526-8	1744 Business Phone: (	_)	_Cell Phone: (	)
Email: GRB	@ VV	m. Com		,	
Name of Applicant					
		(If diff	ferent than Pr	operty Owner)	
Address:					
City:		State:		Zip:	
Home Phone: ()	)	_Business Phone:	(	Cell Phone (	)
Email:					
Address/Location of	property to	be rezoned: 6605	REIN DR KILI	LEEN, TX 76542-	9046
Legal Description:	WAGON WI	EEL SUBDIVISIO	N, BLOCK 002	, LOT 0016	
		Metes & E	Bounds or	Lot(s) Block	Subdivision
Is the rezone reque	st consister	t with the Compreh	nensive Plan?	YES	
Type of Ownership:	X	Sole Ownership	Partnership	Corporation	Other
Present Zoning: R	<u> </u>	_ Present Use: RE	SIDENTIAL, S	INGLE	
Proposed Zoning: _S	SR2	Proposed Use:	RESIDENTIAL	., SINGLE	
Conditional Use Per	mit for:			· · · · · · · · · · · · · · · · · · ·	
This property was co Page <u>89</u> , Ir (Attached)	onveyed to onstrument N	owner by deed date lumber 299	d <u>9/28/1</u> 46 47	995_and rec of the Bell C	orded in Volume <u>3369</u> ounty Deed Records.
ls this the first rezon					d fee)

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:

Mailing Address:

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:

Home Phone: ( \_\_\_ Business Phone: ( \_\_\_ Email: \_\_\_\_

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 act, 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 'I', 'my', or 'me' is a reference to the entity.

Signature of Agent	Title
Printed/Typed Name of Agent	Date
Signature of Agent	Title
Printed/Typed Name of Agent	Date
X Signature of Applicant Runda L. Rauer	Title Owner
> Printed/Typed Name of Applicant Honda L. Bauer	Date Nov 22, 2015
Y Signature of Property Owner Rushda & Bauer	Title Owner
VPrinted/Typed Name of Property Owner Rhonda LBauer	Date _ Nov aa, 2015
Signature of Property Owner Slenn R. Bann	Title OWNER
Printed/Typed Name of Property Owner GLENN R. BAUER	Date
Signature of Property Owner Slem R. Ranco	Title _OWNER
Printed/Typed Name of Property Owner GLENN R. BANER	Date 11/22/15

<sup>\*</sup>Application must be signed by the individual applicant, by each partner of a partnership, or by an officer of a corporation or association.



CASE #: \_\_\_\_

# City of Killeen Zoning Change Application

### [] General Zoning Change \$300.00 [] Conditional Use Permit \$500.00

Name(s) of Property Owner: BREAUX, KENNETH ETUX LENA
Current Address: 6606 WAGON WHEEL DR
City: KILLEEN State: TX Zip: 76542-9058
City:         KILLEEN         State:         TX         Zip:         76542-9058           Home Phone:         ( ) 634-/386 Business Phone:         ( ) Cell Phone:         ( )
Email:
Name of Applicant:(If different than Property Owner)
(If different than Property Owner)
Address:
City: State: Zip:
Home Phone: (Business Phone: (Cell Phone ()
Email:
Address/Location of property to be rezoned: 6606 WAGON WHEEL DR KILLEEN, TX 76542-9058
Legal Description: WAGON WHEEL SUBDIVISION, BLOCK 001, LOT 0012
Metes & Bounds or Lot(s) Block Subdivision
s the rezone request consistent with the Comprehensive Plan? YES
ype of Ownership: X Sole Ownership Partnership Corporation Other
Present Zoning: R1 Present Use: RESIDENTIAL, SINGLE
Proposed Zoning: SR2 Proposed Use: RESIDENTIAL, SINGLE
Conditional Use Permit for:
this property was conveyed to owner by deed dated 7-5-2006 and recorded in Volume 6119 are 601, Instrument Number 31/00 of the Bell County Deed Records.  Attached)
s this the first rezoning application on a unilaterally annexed tract?  Example 2

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: Home Phone: ( \_\_\_ Business Phone: ( \_\_\_ Email: \_\_\_\_ 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 act, 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 'l', 'my', or 'me' is a reference to the entity. Signature of Agent \_\_\_\_\_\_ Title \_\_\_\_\_ Printed/Typed Name of Agent \_\_\_\_\_\_ Date \_\_\_\_\_ Signature of Agent \_\_\_\_\_ Printed/Typed Name of Agent \_\_\_\_\_ Signature of Applicant Letter 1. Brewet Printed/Typed Name of Applicant Signature of Property Owner dance 7, Brecard > Printed/Typed Name of Property Owner Leng T. Breaux Signature of Property Owner Title Printed/Typed Name of Property Owner \_\_\_\_\_\_ Date \_\_\_\_\_ Signature of Property Owner \_\_\_\_\_\_\_ Title \_\_\_\_\_

Printed/Typed Name of Property Owner \_\_\_\_\_\_ Date \_\_\_\_\_

<sup>\*</sup>Application must be signed by the individual applicant, by each partner of a partnership, or by an officer of a corporation or association.



Date Paid: Amount Paid: Cash/MO #/Check #: Receipt #:	\$ #
--	------

CASE#: \_\_\_\_\_

# City of Killeen Zoning Change Application

	Name(s) of Property O	wner: BREAUX, MICHAEL C I	ETUX CARMEN	
	Current Address: 603	DOUBLETREE DR		
	City: KILLEEN	State:		6542- 9011
Y		-681-641 <u>/</u> Business Phone: (		
Y	y Email: Curn	on BYX @ ywnco-le	ממו	
,	Name of Applicant:	(If different		
		(If different	than Property Owner)	
	Address:			
	City:	State:	Zip:	
	Home Phone: ()	Business Phone: (	Cell Phone ()	
	Email:			
	Address/Location of prop	perty to be rezoned: 603 DOUBL	LETREE DR KILLEEN, TX	76542-9011
	Legal Description: WAG	ON WHEEL SUBDIVISION, BLO	OCK 003, LOT 0013	
		Metes & Bounds	s or Lot(s) Block	Subdivision
	Is the rezone request co	nsistent with the Comprehensiv	e Plan? <u>YES</u>	
	Type of Ownership:	X Sole Ownership Part	nershipCorporation _	Other
	Present Zoning: R1	Present Use: RESIDEN	ITIAL Single	
	Proposed Zoning: SR2	Proposed Use: RESID	ENTIAL Single	
	Conditional Use Permit fo	r:	_	
	This property was convey Page 213, Instruit (Attached)	yed to owner by deed dated	and record and record of the Bell Cou	ded in Volume <u>Ø5046</u> , Inty Deed Records.
,	Is this the first rezoning a Yes X	pplication on a unilaterally annex (Fee not required) No	ed tract?(Submit required f	ee)

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: Mailing Address: \_\_\_\_\_ 
 City:
 \_\_\_\_\_\_\_

 State:
 \_\_\_\_\_\_\_
 Home Phone: ( \_\_\_ Business Phone: ( \_\_ Email: \_\_\_\_ 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 act, 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 'I', 'my', or 'me' is a reference to the entity. Signature of Agent \_\_\_\_\_\_ Title \_\_\_\_\_\_ Printed/Typed Name of Agent \_\_\_\_\_ Date Signature of Agent \_\_\_\_ Printed/Typed Name of Agent Date ✓ Signature of Applicant Title Printed/Typed Name of Applicant Date 1 Signature of Property Owner \_ Printed/Typed Name of Property Owner Signature of Property Owner Title 1) Printed/Typed Name of Property Owner Canton Branux Date \_\_\_\_\_/\_ 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.

Date





Date Paid: Amount Paid: Cash/MO #/Check #: Receipt #:	\$ #
Necelpt #.	

CASE#: \_\_\_\_

# City of Killeen Zoning Change Application

	Name(s) of Property Owner: CABRERA, FIDEL
	Current Address: 6603 REIN DR
	City: KILLEEN State: TX Zip: 76542-9044
-	City:       KILLEEN       State:       TX       Zp:       76542-9044         Home Phone: ( )       Business Phone: ( )       Cell Phone: ( )
	Email: + CABRERA 1 @ HotoRR. com
	Name of Applicant: (If different than Property Owner)
	Address:
	City: State: Zip:
	Home Phone: (Business Phone: (Cell Phone ()
	Email:
	Address/Location of property to be rezoned: 6603 REIN DR KILLEEN, TX 76542-9044
	Legal Description: WAGON WHEEL SUBDIVISION, BLOCK 002, LOT 0015
	Metes & Bounds or Lot(s) Block Subdivision
	Is the rezone request consistent with the Comprehensive Plan? YES
	Type of Ownership: X Sole Ownership Partnership Corporation Other
	Present Zoning: R1 Present Use: RESIDENTIAL Single
	Proposed Zoning: SR2 Proposed Use: RESIDENTIAL Single
	Conditional Use Permit for:
	This property was conveyed to owner by deed dated $\frac{S/4/2001}{2001}$ and recorded in Volume $\frac{04388}{2000}$ (Attached)
,	Is this the first rezoning application on a unilaterally annexed tract?  Yes X (Fee not required)

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: Mailing Address: City: \_\_\_\_\_\_ State: \_\_\_\_\_ Zip: \_-\_\_\_\_ Home Phone: ( \_\_\_ Business Phone: ( \_\_\_ Email: \_\_\_\_ 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 act, 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 'l', 'my', or 'me' is a reference to the entity. Signature of Agent \_\_\_\_\_\_ Title \_\_\_\_\_ Printed/Typed Name of Agent \_\_\_\_\_\_ Date \_\_\_\_\_\_ Signature of Agent Printed/Typed Name of Agent. \_\_\_\_\_\_ Date \_\_\_ Printed/Typed Name of Applicant Fidel CABRERA Date 11.3, 2015 Signature of Property Owner Lidel Labrera. Title OWNER - Printed/Typed Name of Property Owner Field Labrera Date 11.3.2015 Signature of Property Owner \_\_\_\_\_ \_\_\_\_\_\_Tite \_\_\_\_\_ Printed/Typed Name of Property Owner \_\_\_\_\_\_ Date \_\_\_\_\_ Signature of Property Owner \_\_\_\_\_\_\_Title \_\_\_\_\_

Printed/Typed Name of Property Owner \_\_\_\_\_\_\_ Date \_\_\_\_\_

<sup>\*</sup>Application must be signed by the individual applicant, by each partner of a partnership, or by an officer of a corporation or association.



Date Paid: Amount Paid; Cash/MO #/Check #:	\$ #
Receipt#:	

CASE#: \_\_\_\_\_

# City of Killeen Zoning Change Application

Name(s) of Property Own	er: <u>CAMPOS, GLORIA</u>		
Current Address: 604 RE	IN DR		
City: KILLEEN	State: TX	Zip: _70	5542- 9006
Home Phone: ( )	Business Phone: ()	Cell Phone: (乙が)	630-4611
Y Email:			
Name of Applicant:			
	(If different than	Property Owner)	
Address:			
	State:		
Home Phone: ()	Business Phone: (	Cell Phone ()	
Email:			
Address/Location of propert	ty to be rezoned: 604 REIN DR KI	LLEEN, TX 76542-9006	5
Legal Description: WAGON	WHEEL SUBDIVISION, BLOCK (	003, LOT 0003	
	Metes & Bounds	or Lot(s) Block	Subdivision
Is the rezone request consi	istent with the Comprehensive Pla	n? <u>YES</u>	
Type of Ownership: X	Sole OwnershipPartnersh	ipCorporation _	Other
Present Zoning: R1	Present Use: RESIDENTIAL	Single	
Proposed Zoning: SR2	Proposed Use:RESIDENT	IAL Single	
Conditional Use Permit for:			
This property was conveyed Page, Instrume (Attached)	to owner by deed dated 3/7 nt Number 4949	11998 and record of the Bell Cou	led in Volume <u>0 2 39</u> 7 nty Deed Records.
Is this the first rezoning appl YesX(Fe	lication on a unilaterally annexed tra ee not required) No	act? (Submit required fe	ee)

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: Home Phone: ( \_\_\_ ) \_\_\_\_\_Business Phone: ( \_\_ ) \_\_\_\_\_Email: \_\_\_\_\_ 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 act, 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 'l', 'my', or 'me' is a reference to the entity. Signature of Agent \_\_\_\_\_\_ Title \_\_\_\_\_ Signature of Agent \_\_\_\_ \_\_\_\_\_\_Title Printed/Typed Name of Agent \_\_\_\_ Date Signature of Applicant \_\_\_\_ Title Owner Printed/Typed Name of Applicant A MPOS \_ Date /1-23-2015 Signature of Property Owner & June Printed/Typed Name of Property Owner Glovia CAMPOS Signature of Property Owner \_\_\_\_\_ Printed/Typed Name of Property Owner \_\_\_\_\_\_ Date \_\_\_\_\_ Signature of Property Owner \_\_\_\_\_\_\_Tritle Printed/Typed Name of Property Owner \_\_\_\_\_\_\_ Date \_\_\_\_\_

\*Application must be signed by the individual applicant, by each partner of a partnership, or by an officer of a corporation or association.



Date Paid: Amount Paid: Cash/MO #/Check #: Receipt #:	\$ #
--	---------

CASE #: \_\_\_\_\_

# City of Killeen Zoning Change Application

Name(s) of Property Owner: CHITI, FRED A ETUX PATRICIA J
Current Address: 6603 WAGON WHEEL DR
City:         KILLEEN         State:         TX         Zip:         76542-9059
Home Phone: (354) 319 - 2176  Business Phone: () Cell Phone: (254) 319 - 2176
Email: PJCHITI @ AOL. Com
Name of Applicant: (If different than Property Owner)
(If different than Property Owner)
Address:
City: State: Zip:
Home Phone: ( Business Phone: ( Cell Phone (
Email:
Address/Location of property to be rezoned: 6603 WAGON WHEEL DR KILLEEN, TC 76542-9059
Legal Description: WAGON WHEEL SUBDIVISION, BLOCK 004, LOT 0001
Metes & Bounds or Lot(s) Block Subdivision
Is the rezone request consistent with the Comprehensive Plan? YES
Type of Ownership: X Sole Ownership Partnership Corporation Other
Present Zoning: R1 Present Use: RESIDENTIAL, Single
Proposed Zoning: SR2 Proposed Use: RESIDENTIAL Single
Conditional Use Permit for:
This property was conveyed to owner by deed dated 02/27/1987 and recorded in Volume 02272  Page 60619, Instrument Number of the Bell County Deed Records.  Attached)
s this the first rezoning application on a unilaterally annexed tract?  (esX(Fee not required)

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: \_\_\_\_\_ Mailing Address: City: \_\_\_\_\_ State: \_\_\_\_ Zip: \_\_\_\_ Home Phone: (\_\_\_) \_\_\_\_\_Business Phone: (\_\_\_) \_\_\_\_\_Email: \_\_\_\_\_ 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 act, 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 'l', 'my', or 'me' is a reference to the entity. Signature of Agent \_\_\_\_\_\_ Title\_\_\_\_\_ Printed/Typed Name of Agent \_\_\_\_\_\_ Date \_\_\_\_\_ Signature of Agent \_\_\_\_\_ Title Printed/Typed Name of Agent \_\_\_\_\_ \_\_\_\_\_ Date X Signature of Applicant Salries & Chiti Title Owner -X Printed/Typed Name of Applicant PATRIGIA J. C.HITI Date 11-15-2015 Signature of Property Owner Palricia ( Chiti Title Owner) X Printed/Typed Name of Property Owner Parkicia 5 CHiri Date 11-15-2015 Signature of Property Owner \_\_\_\_\_ Printed/Typed Name of Property Owner \_\_\_\_\_\_ Date \_\_\_\_\_ Signature of Property Owner \_\_\_\_\_ Title

\*Application must be signed by the individual applicant, by each partner of a partnership, or by an officer of a corporation or association.

Printed/Typed Name of Property Owner \_\_\_\_\_\_ Date \_\_\_\_\_



Date Paid: Amount Paid: Cash/MO #/Check #: Receipt #:	\$ #
--	---------

CASE#:	

# City of Killeen Zoning Change Application

Name(s) of Property Owner: CHRISTMA	N, ROBERT E JR ET	UX GERLINDE M	
Current Address: 6609 WAGON WHEEL I	DR		
City: KILLEEN 254 634-0965	State: TX	Zip: _	76542- 9060
Home Phone: ( ) Business P	hone: ()	_Cell Phone: (	)
Email:			
Name of Applicant:			
	(If different than Pr	operty Owner)	
Address:			
City: State:			
Home Phone: (_)Business P			
Email:			
Address/Location of property to be rezoned:	6609 WAGON WHI	EEL DR KILLEEN,	TX 76542-9060
Legal Description: WAGON WHEEL SUBDI	VISION, BLOCK 004	, LOT 0007	
Me	etes & Bounds or	Lot(s) Block	Subdivision
Is the rezone request consistent with the Co	omprehensive Plan?	YES	
Type of Ownership: X Sole Ownersh	ipPartnership	Corporation	Other
Present Zoning: R1 Present Us	e: RESIDENTIAL, S	SINGLE	
Proposed Zoning: SR2 Proposed L	Jse: RESIDENTIAL	, SINGLE	
Conditional Use Permit for:			
This property was conveyed to owner by dee Page <u>ひっょぷく</u> , Instrument Number (Attached)	d dated 08/22/1989	and reco _ of the Bell Co	rded in Volume02559 unty Deed Records.
s this the first rezoning application on a unila YesX (Fee not required)	terally annexed tract	? (Submit required	fee)

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:

City:	State:	Z	p: <u>-</u>		
Home Phone: ()	Business Phone: (			Email: _	
I acknowledge and affirm signature below, I fully auth		oound by the	words and ac	ts of my	y agent, and by r
representations o binding waivers o consent to legally and, to execute o	contact between m f fact and commitment of rights and releases binding modification documents on my be applies to this speci	nts of every of liabilities as, conditions thalf which a	kind on my be of every kind s, and except are legally bin	ehalf; g d on my ions on	rant legally / behalf; to my behalf;
I understand that the City that my agent has less than	full authority to act, th	en the applic	ation may be s	suspende	ed and I will have
personally participate in the this application are part of statements made by may agits officers, agents, emploactions from all damages, owned by a corporation, pato make this binding appoint reference to the entity.	an official proceeding gent. Therefore, I agre- byees, and third parti attorney fees, interest rtnership, venture, or c	g of City gove e to hold har ies who act i st and costs other legal ent	ernment and, mless and inconnection reliance up arising from to the tention of tention of tention of tention of tention of tention of tention	that the lemnify on my a his mat fy that I	City will rely upon the City of Killee agent's words are ter. If my property have legal authorically.
this application are part of statements made by may ag its officers, agents, emplo actions from all damages, owned by a corporation, pa to make this binding appoint reference to the entity.	an official proceeding gent. Therefore, I agre- pyees, and third parti- attorney fees, interest rtnership, venture, or of tment on behalf of the	g of City gove e to hold har ies who act i st and costs other legal ent entity, and eve	ernment and, mless and ind no reliance up arising from to the reference from the referenc	that the lemnify on my a his mati fy that I nerein to	City will rely upon the City of Killee agent's words are ter. If my property have legal authority, 'my', or 'me' is
this application are part of statements made by may agits officers, agents, emploactions from all damages, owned by a corporation, pato make this binding appoint reference to the entity.  Signature of Agent	an official proceeding gent. Therefore, i agre- pyees, and third part attorney fees, interest rtnership, venture, or of tment on behalf of the	g of City gove e to hold har ies who act i st and costs other legal ent entity, and eve	ernment and, mless and income reliance up arising from to the reference by	that the lemnify on my a his mate fy that I nerein to	City will rely upon the City of Killee agent's words are ter. If my property have legal authority, 'my', or 'me' is
this application are part of statements made by may agits officers, agents, emploactions from all damages, owned by a corporation, pato make this binding appoint reference to the entity.  Signature of Agent  Printed/Typed Name of Agent	an official proceeding gent. Therefore, I agre- byees, and third part attorney fees, intere- rtnership, venture, or of tment on behalf of the	g of City gove e to hold har ies who act i st and costs other legal ent entity, and eve	ernment and, mless and inc n reliance up arising from tity, then I certiery reference h	that the lemnify on my a his matt fy that I herein to	City will rely upon the City of Killee agent's words are ter. If my property have legal authority, 'my', or 'me' is
this application are part of statements made by may agits officers, agents, emploactions from all damages, owned by a corporation, pato make this binding appoint reference to the entity.  Signature of Agent  Printed/Typed Name of Agent  Signature of Agent	an official proceeding gent. Therefore, I agre- pyees, and third part attorney fees, interes rtnership, venture, or of timent on behalf of the	g of City gove e to hold har ies who act i st and costs other legal ent entity, and eve	ernment and, mless and inc n reliance up arising from tity, then I certiery reference h	that the lemnify on my a his mati fy that I nerein to Title Date Title	City will rely upon the City of Killee agent's words are ter. If my property have legal authority, 'my', or 'me' is
this application are part of statements made by may agits officers, agents, emploactions from all damages, owned by a corporation, pato make this binding appoint reference to the entity.  Signature of Agent  Printed/Typed Name of Agent  Signature of Agent	an official proceeding gent. Therefore, I agre- pyees, and third part attorney fees, interes rtnership, venture, or of timent on behalf of the	g of City gove e to hold har ies who act i st and costs other legal ent entity, and eve	ernment and, mless and inc n reliance up arising from tity, then I certiery reference h	that the lemnify on my a his mati fy that I nerein to Title Date Title	City will rely upon the City of Killee agent's words are ter. If my property have legal authority, 'my', or 'me' is
this application are part of statements made by may agits officers, agents, emploactions from all damages, owned by a corporation, pato make this binding appoint reference to the entity.  Signature of Agent  Printed/Typed Name of Agent  Signature of Applicant  Printed/Typed Name of Applicant  Printed/Typed Name of Applicant	an official proceeding ant. Therefore, I agree byees, and third partiattorney fees, interesting the state of	g of City gove e to hold har ies who act i st and costs other legal ent entity, and even	ernment and, mless and inc n reliance up arising from t ity, then I certi ery reference h	that the lemnify on my a his matt fy that I nerein to  Title Date Title Date Title	City will rely upon the City of Killee agent's words are ter. If my property have legal authority, 'my', or 'me' is
this application are part of statements made by may agits officers, agents, emploactions from all damages, owned by a corporation, pato make this binding appoint reference to the entity.  Signature of Agent Printed/Typed Name of Agent Signature of Applicant Printed/Typed Name of Applicant	an official proceeding ant. Therefore, I agree byees, and third partiattorney fees, interesting the state of	g of City gove e to hold har ies who act i st and costs other legal ent entity, and eve	ernment and, mless and inc n reliance up arising from tity, then I certiery reference h	that the lemnify on my a his matt fy that I herein to Title Date Title	City will rely upon the City of Killee agent's words are ter. If my property have legal authority, 'my', or 'me' is
this application are part of statements made by may agits officers, agents, emploactions from all damages, owned by a corporation, pato make this binding appoint reference to the entity.  Signature of Agent Printed/Typed Name of Agent Signature of Applicant Printed/Typed Name of Agent Signature of Applicant Printed/Typed Name of Applicant	an official proceeding ant. Therefore, I agree byees, and third partiattorney fees, interesting the state of	g of City gove e to hold har ies who act i st and costs other legal ent entity, and eve	ernment and, mless and inc n reliance up arising from tity, then I certiery reference h	that the lemnify on my a his matt fy that I herein to Title Date Title	City will rely upon the City of Killee agent's words and ter. If my property have legal author 'l', 'my', or 'me' is
this application are part of statements made by may agits officers, agents, emploactions from all damages, owned by a corporation, pato make this binding appoint reference to the entity.  Signature of Agent Printed/Typed Name of Agent Signature of Applicant Printed/Typed Name of Property Owner	an official proceeding gent. Therefore, I agree by ees, and third partiattorney fees, interesting the state of the state o	g of City gove to hold har less who act ist and costs other legal ententity, and even the costs of the costs	ernment and, mless and inc n reliance up arising from t ity, then I certi ery reference t	that the lemnify on my a his matt fy that I herein to Title Date	City will rely upon the City of Killee agent's words are ter. If my property have legal authority, 'my', or 'me' is
this application are part of statements made by may agits officers, agents, employ actions from all damages, owned by a corporation, pato make this binding appoint reference to the entity.  Signature of Agent  Printed/Typed Name of Agent  Signature of Agent  Printed/Typed Name of Agent  Signature of Agent  Printed/Typed Name of Agent	an official proceeding ant. Therefore, I agree byees, and third part attorney fees, interesting the state of	g of City gove e to hold har ies who act is and costs other legal ententity, and even the costs of the costs	ernment and, mless and inc n reliance up arising from t ity, then I certi ery reference t	that the lemnify on my a his matt fy that I nerein to Title Date Title	City will rely upon the City of Killee agent's words are ter. If my property have legal authority, 'my', or 'me' is a second of the control o
this application are part of statements made by may agits officers, agents, emploactions from all damages, owned by a corporation, pato make this binding appoint reference to the entity.  Signature of Agent Printed/Typed Name of Agent Signature of Applicant Printed/Typed Name of Applicant Printed/Typed Name of Applicant Printed/Typed Name of Applicant Printed/Typed Name of Applicant Signature of Property Owner Printed/Typed Name of Prop	an official proceeding gent. Therefore, I agree gent. Therefore, I agree byees, and third partiattorney fees, interesting the state of	g of City gove to hold har less who act ist and costs other legal ententity, and eventity, and eventity, and eventity.	ernment and, mless and inc n reliance up arising from t ity, then I certi ery reference h	that the lemnify on my a his matt fy that I herein to Title Date Date Date Date Date Date	City will rely up the City of Killee agent's words at ter. If my property have legal author 'I', 'my', or 'me' is



Date Paid: Amount Paid: Cash/MO #/Check #: Receipt #:	\$ #
--	---------

CASE#: \_\_\_\_\_

### City of Killeen Zoning Change Application

	Name(s) of Property Owner: DE RIVAROLA, GEORGE ETUX LOAN
	Current Address: 6610 REIN DR
	City:         KILLEEN         Zip:         76542-9045
_	City:         KILLEEN         State:         TX         Zip:         76542-9045           Home Phone:         (*)
	Email: Olouds vider @ Lot Mail. com
	Name of Applicant:
	(If different than Property Owner)
	Address:
	City: State: Zip:
	Home Phone: (Business Phone: (Cell Phone ()
	Email:
,	Address/Location of property to be rezoned: 6610 REIN DR KILLEEN, TX 76542-9045
	Legal Description: WAGON WHEEL SUBDIVISION, BLOCK 004, LOT 0012
	Metes & Bounds or Lot(s) Block Subdivision
	Is the rezone request consistent with the Comprehensive Plan? YES
-	Type of Ownership: X Sole Ownership Partnership Corporation Other
ı	Present Zoning: R1 Present Use: RESIDENTIAL Single
ı	Proposed Zoning: SR2 Proposed Use: RESDENTIAL Single
(	Conditional Use Permit for:
F (	This property was conveyed to owner by deed dated O6/22/1993 and recorded in Volume O2996 Page Ano 45 Instrument Number 18011 of the Bell County Deed Records.  Attached)
J.	s this the first rezoning application on a unilaterally annexed tract?  'es (Submit required fee)

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: Mailing Address: Home Phone: ( \_\_\_ Business Phone: (\_\_) \_\_\_\_\_Email: \_\_\_\_\_ 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 act, 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 'l', 'my', or 'me' is a reference to the entity. Signature of Agent \_\_\_\_\_\_Title \_\_\_\_\_ Printed/Typed Name of Agent \_\_\_\_\_\_\_ Date \_\_\_\_\_ Signature of Agent Title \_\_\_\_\_ Printed/Typed Name of Agent \_\_\_\_\_ \_\_\_\_\_\_ Date Signature of Applicant \_\_\_\_\_ Title *Owner* Geom de Rriggsh Printed/Typed Name of Applicant \_Date ///1/10/10 Signature of Property Owner Printed/Typed Name of Property Owner George Signature of Property Owner \_\_\_\_ Printed/Typed Name of Property Owner \_\_\_\_\_ Date \_\_ Signature of Property Owner \_\_\_\_\_\_\_

Printed/Typed Name of Property Owner

Revised October 2015

Date

<sup>\*</sup>Application must be signed by the individual applicant, by each partner of a partnership, or by an officer of a corporation or association.

4



Date Paid: Amount Paid: Cash/MO #/Check #: Receipt #:	\$ #
Receipt#.	

CASE #: \_\_\_\_\_

# City of Killeen Zoning Change Application

### [] General Zoning Change \$300.00 [] Conditional Use Permit \$500.00

Name(s) of Property Owner: DIMERY, WALLACE JR ETUX KIL Y
Current Address: 6505 REIN DR
City: KILLEEN State: TX Zip: 76542-9040
Home Phone: ( )254-554-591/Business Phone: ()Cell Phone: ()
Email:
Name of Applicant: (If different than Property Owner)
(If different than Property Owner)
Address:
City: State: Zip:
Home Phone: ( Business Phone: ( Cell Phone (
Email:
Address/Location of property to be rezoned: 6505 REIN DR KILLEEN, TX 76542-9040
Legal Description: WAGON WHEEL SUBDIVISION, BLOCK 002, LOT 0008
Metes & Bounds or Lot(s) Block Subdivision
Is the rezone request consistent with the Comprehensive Plan? YES
Type of Ownership: X Sole Ownership Partnership Corporation Other
Present Zoning: R1 Present Use: RESIDENTIAL, SINGLE
Proposed Zoning: SR2 Proposed Use: RESIDENTIAL, SINGLE
Conditional Use Permit for:
This property was conveyed to owner by deed dated 04/8/1994 and recorded in Volume 03136  Page 0092 , Instrument Number 12935 of the Bell County Deed Records.  (Attached)
s this the first rezoning application on a unilaterally annexed tract?  (Submit required fee)

Dinery Wallace

#### **APPOINTMENT OF AGENT**

As owner of the subject property,  ${\bf I}$  hereby appoint the person designated below to act for me, as  ${\bf my}$  agent in this request.

City: State:	Zip:
Home Phone: ()Business Phone: ()	Email:
I acknowledge and affirm that I will be legally bound by the signature below, I fully authorize my agent to:	e words and acts of my agent, and by m
be the point of contact between myself and representations of fact and commitments of every binding waivers of rights and releases of liabilitie consent to legally binding modifications, condition and, to execute documents on my behalf which authorization only applies to this specific zoning re	y kind on my behalf; grant legally es of every kind on my behalf; to ns, and exceptions on my behalf; are legally binding on me. This
I understand that the City will deal only with a fully authority to act, then the application are part of an official proceeding of City go	ication may be suspended and I will have to nderstand that all communications related to vernment and, that the City will rely upor
statements made by may agent. Therefore, I agree to he Killeen, its officers, agents, employees, and third parties words and actions from all damages, attorney fees, interest my property is owned by a corporation, partnership, venture, o legal authority to make this binding appointment on behalf of the firmy, or 'me' is a reference to the entity.	s who act in reliance upon my agent's est and costs arising from this matter. I be other legal entity, then I certify that I have
Killeen, its officers, agents, employees, and third parties words and actions from all damages, attorney fees, interest my property is owned by a corporation, partnership, venture, or legal authority to make this binding appointment on behalf of the 'my', or 'me' is a reference to the entity.	es who act in reliance upon my agent's est and costs arising from this matter. If or other legal entity, then I certify that I have the entity, and every reference herein to 'I',
Killeen, its officers, agents, employees, and third parties words and actions from all damages, attorney fees, interesting property is owned by a corporation, partnership, venture, of legal authority to make this binding appointment on behalf of the firmy', or 'me' is a reference to the entity.  Signature of Agent	est and costs arising from this matter. I be or other legal entity, then I certify that I have the entity, and every reference herein to 'I'
Killeen, its officers, agents, employees, and third parties words and actions from all damages, attorney fees, interesting property is owned by a corporation, partnership, venture, of legal authority to make this binding appointment on behalf of the firmy', or 'me' is a reference to the entity.  Signature of Agent	est and costs arising from this matter. I be other legal entity, then I certify that I have the entity, and every reference herein to 'I'  Title Date
Killeen, its officers, agents, employees, and third parties words and actions from all damages, attorney fees, interesting property is owned by a corporation, partnership, venture, of legal authority to make this binding appointment on behalf of timy', or 'me' is a reference to the entity.  Signature of Agent	est and costs arising from this matter. I be of other legal entity, then I certify that I have the entity, and every reference herein to 'I'  Title
Killeen, its officers, agents, employees, and third parties words and actions from all damages, attorney fees, interesting property is owned by a corporation, partnership, venture, of legal authority to make this binding appointment on behalf of timy', or 'me' is a reference to the entity.  Signature of Agent  Printed/Typed Name of Agent  Printed/Typed Name of Agent	s who act in reliance upon my agent's est and costs arising from this matter. I or other legal entity, then I certify that I have the entity, and every reference herein to 'I'  Title  Date  Date  Date
Killeen, its officers, agents, employees, and third parties words and actions from all damages, attorney fees, interesting property is owned by a corporation, partnership, venture, or legal authority to make this binding appointment on behalf of the firmy', or 'me' is a reference to the entity.  Signature of Agent  Printed/Typed Name of Agent  Printed/Typed Name of Agent  Printed/Typed Name of Agent	s who act in reliance upon my agent's est and costs arising from this matter. I or other legal entity, then I certify that I have the entity, and every reference herein to 'I'  Title  Date  Date  Date
Killeen, its officers, agents, employees, and third parties words and actions from all damages, attorney fees, interesting property is owned by a corporation, partnership, venture, or legal authority to make this binding appointment on behalf of the my', or 'me' is a reference to the entity.  Signature of Agent  Printed/Typed Name of Agent  Signature of Applicant  Printed/Typed Name of Applicant  Printed/Typed Name of Applicant	s who act in reliance upon my agent's est and costs arising from this matter. I or other legal entity, then I certify that I have the entity, and every reference herein to 'I'  Title  Date  Date  Date
Killeen, its officers, agents, employees, and third parties words and actions from all damages, attorney fees, interesting property is owned by a corporation, partnership, venture, or legal authority to make this binding appointment on behalf of the my', or 'me' is a reference to the entity.  Signature of Agent  Printed/Typed Name of Agent  Signature of Applicant  Printed/Typed Name of Applicant  Signature of Property Owner	Title  Date
Killeen, its officers, agents, employees, and third parties words and actions from all damages, attorney fees, interesting property is owned by a corporation, partnership, venture, of legal authority to make this binding appointment on behalf of the firmy', or 'me' is a reference to the entity.  Signature of Agent  Printed/Typed Name of Agent  Signature of Applicant  Printed/Typed Name of Applicant  Signature of Property Owner  Printed/Typed Name of Property Owner	s who act in reliance upon my agent's est and costs arising from this matter. I be other legal entity, then I certify that I have the entity, and every reference herein to 'I'  Title  Date  Title  Date  Title  Date  Title  Date  Title  Date
Killeen, its officers, agents, employees, and third parties words and actions from all damages, attorney fees, interes my property is owned by a corporation, partnership, venture, of legal authority to make this binding appointment on behalf of the firmy', or 'me' is a reference to the entity.  Signature of Agent  Printed/Typed Name of Agent  Signature of Applicant  Printed/Typed Name of Applicant  Signature of Property Owner  Printed/Typed Name of Property Owner  Signature of Property Owner  Signature of Property Owner  Signature of Property Owner	Title  Date  Date  Title  Date  Date  Date  Title  Date
Killeen, its officers, agents, employees, and third parties words and actions from all damages, attorney fees, interes my property is owned by a corporation, partnership, venture, or legal authority to make this binding appointment on behalf of the firmy', or 'me' is a reference to the entity.  Signature of Agent  Printed/Typed Name of Agent  Signature of Applicant  Printed/Typed Name of Applicant  Signature of Property Owner  Printed/Typed Name of Property Owner	s who act in reliance upon my agent's est and costs arising from this matter. I be other legal entity, then I certify that I have the entity, and every reference herein to 'I'  Title

<sup>\*</sup>Application must be signed by the individual applicant, by each partner of a partnership, or by an officer of a corporation or association.



Date Paid:	
Amount Paid:	\$
Cash/MO #/Check #:	#
Receipt#:	
-	

CASE	#:	

# City of Killeen Zoning Change Application

### [] General Zoning Change \$300.00 [] Conditional Use Permit \$500.00

Name(s) of Property Owner: DOWLING, DONALD L ETUX LYNN Y
Current Address: 601 REIN DR
City:         KILLEEN         State:         TX         Zip:         - 76542-9052
Home Phone: (
Email: lydowling@hot.rr.com
Name of Applicant:
(If different than Property Owner)
Address:
City: State: Zip:
Home Phone: ()Business Phone: ( )Cell Phone ()
Email:
Address/Location of property to be rezoned: 601 REIN DR KILLEEN, TX 76542-9052
Legal Description: WAGON WHEEL SUBDIVISION, BLOCK 002, LOT 0005
Metes & Bounds or Lot(s) Block Subdivision
Is the rezone request consistent with the Comprehensive Plan? YES
Type of Ownership: X Sole Ownership Partnership Corporation Other
Present Zoning: R1 Present Use: Residential, Single
Proposed Zoning: SR2 Proposed Use: Residential, Single
Conditional Use Permit for:
This property was conveyed to owner by deed dated 1/15/1987 and recorded in Volume 02262  Page 00289, Instrument Number of the Bell County Deed Records.  (Attached)
s this the first rezoning application on a unilaterally annexed tract?  /es(Submit required fee)

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:

Mailing Address:		
City:	State: Z	ip:
Home Phone: ()	Business Phone: ()	Email:
I acknowledge and affirm the signature below, I fully author		words and acts of my agent, and by my
representations of binding waivers of consent to legally I and, to execute do	contact between myself and the fact and commitments of every frights and releases of liabilities binding modifications, conditions ocuments on my behalf which a applies to this specific zoning recomments.	kind on my behalf; grant legally s of every kind on my behalf; to s, and exceptions on my behalf; re legally binding on me. This
that my agent has less than personally participate in the	full authority to act, then the application of the application. I und	rized agent. At any time it should appear ation may be suspended and I will have to derstand that all communications related to ernment and, that the City will rely upon
statements made by may a Killeen, its officers, agent words and actions from all my property is owned by a co	agent. Therefore, I agree to hole s, employees, and third parties I damages, attorney fees, interestorporation, partnership, venture, or binding appointment on behalf of the	d harmless and indemnify the City of who act in reliance upon my agent's st and costs arising from this matter. If other legal entity, then I certify that I have ne entity, and every reference herein to 'I',
statements made by may a Killeen, its officers, agent words and actions from all my property is owned by a colegal authority to make this be 'my', or 'me' is a reference to	agent. Therefore, I agree to hole s, employees, and third parties I damages, attorney fees, interest corporation, partnership, venture, or binding appointment on behalf of the the entity.	d harmless and indemnify the City of who act in reliance upon my agent's st and costs arising from this matter. If other legal entity, then I certify that I have ne entity, and every reference herein to 'I',
statements made by may a Killeen, its officers, agent words and actions from all my property is owned by a collegal authority to make this beauthority or 'me' is a reference to Signature of Agent	agent. Therefore, I agree to hole s, employees, and third parties I damages, attorney fees, interest corporation, partnership, venture, or binding appointment on behalf of the the entity.	d harmless and indemnify the City of who act in reliance upon my agent's st and costs arising from this matter. If other legal entity, then I certify that I have ne entity, and every reference herein to 'I',  Title
statements made by may a Killeen, its officers, agent words and actions from all my property is owned by a co legal authority to make this b 'my', or 'me' is a reference to  Signature of Agent  Printed/Typed Name of Agen	agent. Therefore, I agree to holes, employees, and third parties I damages, attorney fees, interest or poration, partnership, venture, or binding appointment on behalf of the entity.	d harmless and indemnify the City of who act in reliance upon my agent's st and costs arising from this matter. If other legal entity, then I certify that I have ne entity, and every reference herein to 'I',  Title
statements made by may a Killeen, its officers, agent words and actions from all my property is owned by a co legal authority to make this b 'my', or 'me' is a reference to  Signature of Agent Printed/Typed Name of Agent Signature of Agent	agent. Therefore, I agree to holes, employees, and third parties I damages, attorney fees, interest or poration, partnership, venture, or binding appointment on behalf of the entity.	d harmless and indemnify the City of who act in reliance upon my agent's st and costs arising from this matter. If other legal entity, then I certify that I have ne entity, and every reference herein to 'I',  Title  Date  Title
statements made by may a Killeen, its officers, agent words and actions from all my property is owned by a co legal authority to make this b 'my', or 'me' is a reference to  Signature of Agent Printed/Typed Name of Agent Signature of Agent Printed/Typed Name of Agent	agent. Therefore, I agree to holes, employees, and third parties I damages, attorney fees, interest or poration, partnership, venture, or binding appointment on behalf of the entity.  The entity of	d harmless and indemnify the City of who act in reliance upon my agent's st and costs arising from this matter. If other legal entity, then I certify that I have ne entity, and every reference herein to 'I',  Title  Date  Date  Date
statements made by may a Killeen, its officers, agent words and actions from all my property is owned by a co legal authority to make this b 'my', or 'me' is a reference to  Signature of Agent Printed/Typed Name of Agent Signature of Agent Printed/Typed Name of Agent	agent. Therefore, I agree to holes, employees, and third parties I damages, attorney fees, interest or poration, partnership, venture, or binding appointment on behalf of the entity.  The entity of	d harmless and indemnify the City of who act in reliance upon my agent's st and costs arising from this matter. If other legal entity, then I certify that I have ne entity, and every reference herein to 'I',  Title  Date  Title  Date  Title
statements made by may a Killeen, its officers, agent words and actions from all my property is owned by a co- legal authority to make this b 'my', or 'me' is a reference to  Signature of Agent Printed/Typed Name of Agen Signature of Applicant Printed/Typed Name of Applicant Printed/Typed Name of Applicant	agent. Therefore, I agree to holes, employees, and third parties I damages, attorney fees, interest orporation, partnership, venture, or binding appointment on behalf of the other entity.  The standard content of the content of the entity.	d harmless and indemnify the City of who act in reliance upon my agent's st and costs arising from this matter. If other legal entity, then I certify that I have ne entity, and every reference herein to 'I',  Title  Date  Title  Date  Title  Date  Title  Date
statements made by may a Killeen, its officers, agent words and actions from all my property is owned by a co- legal authority to make this b 'my', or 'me' is a reference to  Signature of Agent Printed/Typed Name of Agen Signature of Applicant Printed/Typed Name of Applicant Printed/Typed Name of Applicant	agent. Therefore, I agree to holes, employees, and third parties I damages, attorney fees, interest or poration, partnership, venture, or binding appointment on behalf of the other entity.  The cant Lynn I. (Soul of the cant Lynn I.) (So	d harmless and indemnify the City of who act in reliance upon my agent's st and costs arising from this matter. If other legal entity, then I certify that I have ne entity, and every reference herein to 'I',  Title  Date  Title  Date  Title
statements made by may a Killeen, its officers, agent words and actions from all my property is owned by a co- legal authority to make this b 'my', or 'me' is a reference to  Signature of Agent Printed/Typed Name of Agent Signature of Applicant Printed/Typed Name of Applicant Signature of Property Owner	agent. Therefore, I agree to holes, employees, and third parties I damages, attorney fees, interest or poration, partnership, venture, or binding appointment on behalf of the entity.  The cant Lynn I. Coult are the cart Lynn I. Coult are	d harmless and indemnify the City of who act in reliance upon my agent's st and costs arising from this matter. If other legal entity, then I certify that I have ne entity, and every reference herein to 'I',  Title  Date  Title  Date  Title  Date  Title  Date  Title  Date  Title  Date  Title
statements made by may a Killeen, its officers, agent words and actions from all my property is owned by a co legal authority to make this b 'my', or 'me' is a reference to  Signature of Agent Printed/Typed Name of Agent Signature of Agent Printed/Typed Name of Agent Signature of Applicant Printed/Typed Name of Applic Signature of Property Owner Printed/Typed Name of Property Printed/Typed Name of Property	agent. Therefore, I agree to holes, employees, and third parties I damages, attorney fees, interest or por attorney personation, partnership, venture, or binding appointment on behalf of the entity.  The cant Lynn Country of the entity of t	d harmless and indemnify the City of who act in reliance upon my agent's st and costs arising from this matter. If other legal entity, then I certify that I have ne entity, and every reference herein to 'I',  Title  Date
statements made by may a Killeen, its officers, agent words and actions from all my property is owned by a co legal authority to make this b 'my', or 'me' is a reference to  Signature of Agent Printed/Typed Name of Agent Signature of Applicant Printed/Typed Name of Applic Signature of Property Owner Printed/Typed Name of Property Signature of Property Owner	agent. Therefore, I agree to holes, employees, and third parties I damages, attorney fees, interest or poration, partnership, venture, or binding appointment on behalf of the other entity.  The cant Lynn I. Coult of the entity owner Lynn I. Cou	d harmless and indemnify the City of who act in reliance upon my agent's st and costs arising from this matter. If other legal entity, then I certify that I have ne entity, and every reference herein to 'I',  Title  Date  Title

\*Application must be signed by the individual applicant, by each partner of a partnership, or by an officer of a corporation or association.



Date Paid: Amount Paid: Cash/MO #/Check #: Receipt #:	\$ #
--	---------

CASE#: \_

# City of Killeen Zoning Change Application

Name(s) of Property Owne	DOWLING, EMILY J		<del>-</del>
Current Address: 601 REII	N DR		
City: KILLEEN	State:	TX Zip:	76542
Home Phone: ( 191-5-	161 Business Phone: ()	Cell Phone: ( _	)
	Damail.com		
Name of Applicant:			
	(If different t	han Property Owner)	
Address:			
City:	State:	Zip:	
Home Phone: ()	Business Phone: (	Cell Phone (	)
Email:			
Address/Location of property	to be rezoned: 6510 REIN	DR KILLEEN, TX 76542	2
Legal Description: WAGON	WHEEL SUBDIVISION, BLO	CK 003, LOT 001	
¢	Metes & Bounds	or Lot(s) Block	Subdivision
Is the rezone request consis	stent with the Comprehensive	Plan? YES	
Type of Ownership: X	Sole OwnershipPartn	ershipCorporation	Other
Present Zoning: R1	Present Use: RESIDEN	ΓΙΑL, SINGLE	
Proposed Zoning: SR2	Proposed Use:RESIDE	ENTIAL, SINGLE	
Conditional Use Permit for: _			
This property was conveyed Page <u>fiz</u> , Instrumer (Attached)	to owner by deed dated 8/5/ It Number	2004and rec of the Bell C	corded in Volume 5450 County Deed Records.
s this the first rezoning applied s	cation on a unilaterally annexe e not required) No	ed tract? (Submit require	ed fee)

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:	
Mailing Address:	
City: State: Zip:	
Home Phone: ()Business Phone: ()	Email:
I acknowledge and affirm that I will be legally bound by the words and signature below, I fully authorize my agent to:	d acts of my agent, and by m
be the point of contact between myself and the City: representations of fact and commitments of every kind on me binding waivers of rights and releases of liabilities of every consent to legally binding modifications, conditions, and excand, to execute documents on my behalf which are legally authorization only applies to this specific zoning request.	ny behalf; grant legally kind on my behalf; to ceptions on my behalf;
I understand that the City will deal only with a fully authorized age that my agent has less than full authority to act, then the application may personally participate in the disposition of the application. I understand the this application are part of an official proceeding of City government a statements made by may agent. Therefore, I agree to hold harmless and its officers, agents, employees, and third parties who act in reliance actions from all damages, attorney fees, interest and costs arising from the owned by a corporation, partnership, venture, or other legal entity, then I to make this binding appointment on behalf of the entity, and every reference to the entity.	be suspended and I will have to at all communications related to and, that the City will rely upon d indemnify the City of Killeen e upon my agent's words and om this matter. If my property is certify that I have legal authority
Signature of Agent	Title
Printed/Typed Name of Agent	
Signature of Agent	
	Date
Signature of Applicant 9 MW J. DMM &	Title Olmer
Printed/Typed Name of Applicant Final Coulting	Date 11/27/15
Signature of Property Owner Guly L. Douline	Title Owner
Printed/Typed Name of Property Owner Fmily J. Dowling	Date 1/27/15
Signature of Property Owner	Title
Printed/Typed Name of Property Owner	Date
Signature of Property Owner	Title
Printed/Typed Name of Property Owner	Date

<sup>\*</sup>Application must be signed by the individual applicant, by each partner of a partnership, or by an officer of a corporation or association.



Date Paid: Amount Paid: Cash/MO #/Check#:	\$ #
Receipt#:	

CASE #: \_\_\_\_\_

# City of Killeen Zoning Change Application

	Name(s) of Property Ow	ner: DUNN, DANIEL R	AY		
	Current Address: 601 D	OUBLETREE DR			
	City: KILLEEN		State: TX	Zip:	76542-9011
1					)
Y					
	Name of Applicant:				
		(If diff	erent than Pr	operty Owner)	
	Address:				
	City:				
	Home Phone: ()	Business Phone: (		Cell Phone (	)
		-			
	Address/Location of prope	rty to be rezoned: $601  \mathrm{D}$	OUBLETREE	DR KILLEEN, T	X 76542-9011
	Legal Description: WAGO	N WHEEL SUBDIVISION	N, BLOCK 003	, LOT 0014	
		Metes & B	ounds or	Lot(s) Block	Subdivision
	Is the rezone request con-	sistent with the Compreh	ensive Plan?	YES	
	Type of Ownership: X	Sole Ownership	_Partnership	Corporation	Other
	Present Zoning: R1	Present Use: RES	IDENTIAL S	ingle	
	Proposed Zoning: SR2	Proposed Use:	RESDENTIAL	Single	
	Conditional Use Permit for:				
	This property was conveye Page, Instrum (Attached)	d to owner by deed dated ent Number 2012	1/24/2 -3692 6003692	o/2and reco_ of the Bell Co	orded in Volume <u>\$054</u> , punty Deed Records.
	Is this the first rezoning appropriate X (i	olication on a unilaterally : Fee not required) N	annexed tract	? _(Submit required	l fee)

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: Mailing Address: City: \_\_\_\_\_\_ State: \_\_\_\_ Zip: \_-\_\_\_\_ Home Phone: ( \_\_\_ Business Phone: ( \_\_\_ Email: \_\_\_\_ 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 act, 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 'l', 'my', or 'me' is a reference to the entity. Signature of Agent \_\_\_\_\_\_ Title \_\_\_\_\_ Printed/Typed Name of Agent \_\_\_\_\_\_ Date Signature of Agent \_\_\_\_\_\_\_ Title \_\_\_\_\_\_ Printed/Typed Name of Agent

Signature of Applicant

Title

| Date | | Printed/Typed Name of Agent \_\_\_\_\_ Printed/Typed Name of Applicant Signay R. Dura Date : 1/15/14 Printed/Typed Name of Property Owner Date 11/15/15 Signature of Property Owner Printed/Typed Name of Property Owner \_\_\_\_\_\_ Date \_\_\_\_\_

Signature of Property Owner \_\_\_\_\_\_\_ Title \_\_\_\_\_\_

Printed/Typed Name of Property Owner \_\_\_\_\_\_ Date

<sup>\*</sup>Application must be signed by the individual applicant, by each partner of a partnership, or by an officer of a corporation or association.



Date Paid: Amount Paid: Cash/MO #/Check #: Receipt#:	\$ #
---	---------

CASE#	

# City of Killeen Zoning Change Application

Name(s) of Property Owner	HARKIN, KATHY JO		
Current Address: 6607 REIN	DR		
City: KILLEEN	State:	X Zip:	76542-9046
	Business Phone: 854) 200		
-Email: KHARKOI			
	(If different th		
	(If different th	an Property Owner)	
Address:			
	State:		
Home Phone: ()	Business Phone: (	Cell Phone (	)
Email:			
Address/Location of property	to be rezoned: 6607 REIN DR	KILLEEN, TX 76542-	9046
Legal Description: WAGON V	WHEEL SUBDIVISION, BLOC	K 002, LOT 0017	
	Metes & Bounds	or Lot(s) Block	Subdivision
Is the rezone request consist	ent with the Comprehensive F	Plan? YES	
Type of Ownership: X	Sole OwnershipPartne	rshipCorporation	Other
Present Zoning: R1	Present Use: RESIDENTI	AL, SINGLE	
Proposed Zoning: SR2	Proposed Use: RESIDEN	TIAL, SINGLE	
Conditional Use Permit for: _			
This property was conveyed to Page, Instrument (Attached)	o owner by deed dated <i></i> : Number3 <i>૬५/৪</i>	<u>/3 / /998</u> and rec of the Bell C	orded in Volume <u>3877</u> ounty Deed Records.
Is this the first rezoning applic Yes X (Fee	ation on a unilaterally annexed not required)	tract? (Submit require	d fee)

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: Mailing Address: \_\_\_\_\_ \_\_ City: \_\_\_\_\_ State: \_\_\_\_ Zip: \_\_\_ - \_\_\_\_ Home Phone: (\_\_\_) \_\_\_\_\_Business Phone: (\_\_\_) \_\_\_\_\_Email: \_\_\_\_\_ 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 act, 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 'l', 'my', or 'me' is a reference to the entity. Signature of Agent \_\_\_\_\_\_ Title Printed/Typed Name of Agent Date Signature of Agent Printed/Typed Name of Agent Date Signature of Applicant The Golden Title Owner Printed/Typed Name of Applicant Harkin Date 11-3-15 Signature of Property Owner Kathyn On John Kun \_\_\_\_ Title /numer

Printed/Typed Name of Property Owner \_\_\_\_\_\_ Date \_\_\_\_\_

Printed/Typed Name of Property Owner Kathy Jo Nankin Date 11-3-15

Printed/Typed Name of Property Owner \_\_\_\_\_\_ Date \_\_\_\_\_

Revised October 2015

Signature of Property Owner \_\_\_\_\_

Signature of Property Owner

\_\_\_\_\_\_ Title

\_\_\_\_\_Title

<sup>\*</sup>Application must be signed by the individual applicant, by each partner of a partnership, or by an officer of a corporation or association.



Date Paid: Amount Paid: Cash/MO #/Check #: Receipt #:	\$ #

CASE#:

# City of Killeen Zoning Change Application

	Name(s) of Property Owner: GARRISON, RAYMOND E ETUX ELIZABETH A
	Current Address: 603 REIN DR
	City:         KILLEEN         State:         TX         Zip:         76542-9052
λ	Home Phone: Md 57/-400 Phone: ( ) Coll Phone: ( )
X	Email: rations of hote of com
	Name of Applicant: (If different than Property Owner)
	(If different than Property Owner)
	Address:
	City: State: Zip:
	Home Phone: ( Cell Phone (
	Email:
	Address/Location of property to be rezoned: 603 REIN DR KILLEEN, TX 76542-9052
	Legal Description: WAGON WHEEL SUBDIVISION, BLOCK 002, LOT 0004
	Metes & Bounds or Lot(s) Block Subdivision
	Is the rezone request consistent with the Comprehensive Plan? YES
	Type of Ownership: X Sole Ownership Partnership Corporation Other
	Present Zoning: R1 Present Use: RESIDENTIAL Single
	Proposed Zoning: SR2 Proposed Use: RESIDENTIAL, Sinsle
	Conditional Use Permit for:
	This property was conveyed to owner by deed dated O2/22/1993 and recorded in Volume O2944  Page O0 D3 Instrument Number 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)

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: \_\_\_\_\_ Mailing Address: City: \_\_\_\_\_ State: \_\_\_\_ Zip: \_\_\_ =\_\_\_\_ Home Phone: (\_\_\_) \_\_\_\_\_Business Phone: (\_\_\_) \_\_\_\_\_ Email: \_\_\_\_ 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 act, 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 'I', 'my', or 'me' is a reference to the entity. Signature of Agent \_\_\_\_\_\_ Title\_\_\_\_ Printed/Typed Name of Agent \_\_\_\_\_\_ Date \_\_\_\_ Signature of Agent \_\_\_\_\_ Printed/Typed Name of Agent \_\_\_\_\_ Date X Signature of Applicant KOn Language Y Printed/Typed Name of Applicant / KAUMONCI (Sart/50N \_ Date \_1//15 X Signature of Property Owner Tay Day X Printed/Typed Name of Property Owner NAMON Signature of Property Owner \_\_\_\_\_ \_\_\_\_\_ Title Printed/Typed Name of Property Owner \_\_\_\_\_ Date \_\_\_\_ Signature of Property Owner \_\_\_

Printed/Typed Name of Property Owner \_\_\_\_\_\_ Date \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_Title

<sup>\*</sup>Application must be signed by the individual applicant, by each partner of a partnership, or by an officer of a corporation or association.



Date Paid: Amount Paid: Cash/MO #/Check #: Receipt #:	\$ #
	#

CASE #: \_\_\_\_

# City of Killeen Zoning Change Application

[] General Zoning Change \$300.00 [] Conditional Use Permit \$500.00

Name(s) of Property Owner: GUINTHER,	SHANE E ETUX MI	CHELLE	
Current Address: 6506 REIN DR			
City: KILLEEN	State: TX	Zp:	76542-5653
Home Phone: ()291-8678 Business Pt	one: ()	Cell Phone: (	)
Email: TXMX hacer @ Hota			
Name of Applicant:			
	(If different than Pr	operty Owner)	
Address:			
City:State:		Zp:	
Home Phone: ()Business Ph	ione: (	Cell Phone (	)
Email:			
Address/Location of property to be rezoned:	6506 REIN DR KILI	LEEN, TX 76542-5	5653
Legal Description: WAGON WHEEL SUBDIV	/ISION, BLOCK 003	, LOT 0008	
Met	es & Bounds or	Lot(s) Block	Subdivision
Is the rezone request consistent with the Co	mprehensive Plan?	YES	
Type of Ownership: X Sole Ownershi	pPartnership	Corporation	Other
Present Zoning: R1 Present Use	RESIDENTIAL, S	INGLE	
Proposed Zoning: SR2 Proposed U	se: RESIDENTIAL	., SINGLE	
Conditional Use Permit for:			
This property was conveyed to owner by deed Page, Instrument Number(Attached)	d dated		orded in Volume ounty Deed Records.
Is this the first rezoning application on a unilat Yes X (Fee not required)			i fee)

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:

City:	State:	Zip:	
Home Phone: ()	Business Phone: ()	Email:	
I acknowledge and affirm that signature below, I fully authorize	t I will be legally bound by the ze my agent to:	e words and acts of my	agent, and by my
representations of fa binding waivers of ri consent to legally bir and, to execute docu	ntact between myself and ct and commitments of every ghts and releases of liabilitiending modifications, condition uments on my behalf which polies to this specific zoning re	kind on my behalf; gres of every kind on myns, and exceptions on are legally binding on	rant legally behalf; to my behalf:
that my agent has less than ful personally participate in the dis	II deal only with a fully author I authority to act, then the application. I un	cation may be suspende derstand that all commu	d and I will have to
statements made by may age Killeen, its officers, agents, words and actions from all d my property is owned by a corp	official proceeding of City governt. Therefore, I agree to ho employees, and third parties amages, attorney fees, intereporation, partnership, venture, oding appointment on behalf of the enterest of the control of th	vernment and, that the old harmless and inde s who act in reliance st and costs arising fr r other legal entity, then	mnify the City of upon my agent's om this matter. If I certify that I have
statements made by may age Killeen, its officers, agents, words and actions from all d my property is owned by a corplegal authority to make this bin 'my', or 'me' is a reference to the	official proceeding of City governt. Therefore, I agree to ho employees, and third parties amages, attorney fees, intereporation, partnership, venture, oding appointment on behalf of the entity.	vernment and, that the old harmless and inde s who act in reliance est and costs arising froughter regal entity, then the entity, and every reference.	mnify the City of upon my agent's om this matter. If I certify that I have erence herein to 'I',
statements made by may age Killeen, its officers, agents, words and actions from all d my property is owned by a corp legal authority to make this bin 'my', or 'me' is a reference to th  Signature of Agent	official proceeding of City governt. Therefore, I agree to ho employees, and third parties amages, attorney fees, intereporation, partnership, venture, oding appointment on behalf of the entity.	vernment and, that the old harmless and inde is who act in reliance est and costs arising from rother legal entity, then the entity, and every reference.  Title	mnify the City of upon my agent's om this matter. If I certify that I have erence herein to 'l',
statements made by may age Killeen, its officers, agents, words and actions from all d my property is owned by a corp legal authority to make this bin 'my', or 'me' is a reference to th  Signature of Agent  Printed/Typed Name of Agent	official proceeding of City governt. Therefore, I agree to ho employees, and third parties amages, attorney fees, interesporation, partnership, venture, oding appointment on behalf of the entity.	vernment and, that the old harmless and inde is who act in reliance ist and costs arising for rother legal entity, then the entity, and every reference.  Title Date	mnify the City of upon my agent's om this matter. If I certify that I have erence herein to 'I',
statements made by may age Killeen, its officers, agents, words and actions from all d my property is owned by a corp legal authority to make this bin- 'my', or 'me' is a reference to th  Signature of Agent Printed/Typed Name of Agent Signature of Agent	official proceeding of City governt. Therefore, I agree to ho employees, and third parties amages, attorney fees, intereporation, partnership, venture, oding appointment on behalf of the entity.	vernment and, that the old harmless and inde is who act in reliance ist and costs arising from the legal entity, then the entity, and every reference.  Title  Date  Title	mnify the City of upon my agent's om this matter. If I certify that I have erence herein to 'I',
statements made by may age Killeen, its officers, agents, words and actions from all d my property is owned by a corp legal authority to make this bin- 'my', or 'me' is a reference to th  Signature of Agent Printed/Typed Name of Agent Signature of Agent	official proceeding of City governt. Therefore, I agree to ho employees, and third parties amages, attorney fees, intereporation, partnership, venture, oding appointment on behalf of the entity.	vernment and, that the old harmless and inde is who act in reliance ist and costs arising from the legal entity, then the entity, and every reference.  Title  Date  Title	mnify the City of upon my agent's om this matter. If I certify that I have erence herein to 'I',
statements made by may age Killeen, its officers, agents, words and actions from all d my property is owned by a corp legal authority to make this bin 'my', or 'me' is a reference to th  Signature of Agent Printed/Typed Name of Agent Printed/Typed Name of Agent Signature of Applicant Printed/Typed Name of Agent Printed/Typed Name of Applicant	official proceeding of City governt. Therefore, I agree to ho employees, and third parties amages, attorney fees, interesporation, partnership, venture, oding appointment on behalf of the entity.	vernment and, that the old harmless and inde is who act in reliance ist and costs arising for rother legal entity, then the entity, and every reference.  Title	mnify the City of upon my agent's om this matter. If I certify that I have erence herein to 'I',
statements made by may age Killeen, its officers, agents, words and actions from all d my property is owned by a corp legal authority to make this bin 'my', or 'me' is a reference to th  Signature of Agent Printed/Typed Name of Agent Printed/Typed Name of Agent Signature of Applicant Printed/Typed Name of Agent Printed/Typed Name of Applicant	official proceeding of City governt. Therefore, I agree to ho employees, and third parties amages, attorney fees, interesporation, partnership, venture, oding appointment on behalf of the entity.	vernment and, that the old harmless and inde is who act in reliance ist and costs arising for rother legal entity, then the entity, and every reference.  Title	mnify the City of upon my agent's om this matter. If I certify that I have erence herein to 'I',
statements made by may age Killeen, its officers, agents, words and actions from all d my property is owned by a corp legal authority to make this bin 'my', or 'me' is a reference to th  Signature of Agent Printed/Typed Name of Agent Printed/Typed Name of Agent Signature of Applicant Printed/Typed Name of Applicant Signature of Property Owner	official proceeding of City governt. Therefore, I agree to ho employees, and third parties amages, attorney fees, interesporation, partnership, venture, oding appointment on behalf of the entity.	vernment and, that the old harmless and indess who act in reliance set and costs arising for rother legal entity, then the entity, and every reference.  Title	mnify the City of upon my agent's om this matter. If I certify that I have erence herein to 'I',
statements made by may age Killeen, its officers, agents, words and actions from all d my property is owned by a corp legal authority to make this bin 'my', or 'me' is a reference to th  Signature of Agent Printed/Typed Name of Agent Signature of Applicant Printed/Typed Name of Applicant Signature of Property Owner Printed/Typed Name of Property	official proceeding of City governt. Therefore, I agree to ho employees, and third parties amages, attorney fees, interesporation, partnership, venture, oding appointment on behalf of the entity.  The Shane Ginthey Owner Shane Ginthey	vernment and, that the old harmless and indess who act in reliance set and costs arising for rother legal entity, then the entity, and every reference.  Title	mnify the City of upon my agent's om this matter. It I certify that I have erence herein to 'I',
statements made by may age Killeen, its officers, agents, words and actions from all d my property is owned by a corp legal authority to make this bin 'my', or 'me' is a reference to th  Signature of Agent Printed/Typed Name of Agent Signature of Applicant Printed/Typed Name of Applicant Signature of Property Owner Printed/Typed Name of Property Signature of Property Owner	official proceeding of City governt. Therefore, I agree to ho employees, and third parties amages, attorney fees, interesporation, partnership, venture, oding appointment on behalf of the entity.  Shane Ginthey Owner Shane Ginth	vernment and, that the old harmless and inde is who act in reliance is and costs arising from the legal entity, then the entity, and every reference is a cost of the cost of	mnify the City of upon my agent's om this matter. It I certify that I have erence herein to 'I',
statements made by may age Killeen, its officers, agents, words and actions from all d my property is owned by a corp legal authority to make this bin 'my', or 'me' is a reference to th  Signature of Agent Printed/Typed Name of Agent Signature of Applicant Printed/Typed Name of Applicant Signature of Property Owner Printed/Typed Name of Property Signature of Property Owner Comparison of Property Signature of Property Owner Comparison of Property Signature of Property Owner Comparison of Property Comp	official proceeding of City governt. Therefore, I agree to ho employees, and third parties amages, attorney fees, interesporation, partnership, venture, oding appointment on behalf of the entity.  The Shane Ginthey Owner Shane Ginthey	vernment and, that the old harmless and inde is who act in reliance ist and costs arising for rother legal entity, then the entity, and every reference is a cost of the cost of the entity is a cost	mnify the City of upon my agent's om this matter. It I certify that I have erence herein to 'I',  Owner  Owner  10-23-201

\*Application must be signed by the individual applicant, by each partner of a partnership, or by an officer of a corporation or association.



Date Paid: Amount Paid: Cash/MO #/Check #: Receipt #:	\$
	Amount Paid: Cash/MO #/Check #:

### City of Killeen Zoning Change Application

Name(s) of Property Own	er: JAMES, ANTHONY L JR ET	UX EDRICA F
Current Address: 6511 WA	GON WHEEL DR	
City: KILLEEN	State: TX	Zip: 76542-9056
Home Phone: ( ) <u>251-8</u>	638 Business Phone: ()	Cell Phone: (354) 351-8638
Email: janesform	ou Denbargnail.	com
Name of Applicant:	0	
	(If different that	n Property Owner)
Address:		
City:	State:	Zip:
Home Phone: ()	Business Phone: (	Cell Phone ()
Email:		
Address/Location of propert	y to be rezoned: 6511 WAGON V	WHEEL DR KILLEEN, TX 76542-9056
Legal Description: WAGON	WHEEL SUBDIVISION, BLOCK	003, LOT 0007
	Metes & Bounds	or Lot(s) Block Subdivision
Is the rezone request consi	stent with the Comprehensive Pla	an? YES
Type of Ownership: X	Sole OwnershipPartners	hipCorporationOther
		L, SINGLE
	Proposed Use:RESIDENT	
Conditional Use Permit for:		
		and recorded in Volume 53/2 of the Bell County Deed Records.
Is this the first rezoning appl Yes (Fe	ication on a unilaterally annexed to ee not required) No	ract? (Submit required fee)

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:		
Mailing Address:		
City:	State: Zip	o:
Home Phone: ()	Business Phone: ()	Email:
I acknowledge and affirm signature below, I fully aut		words and acts of my agent, and by my
representations binding waivers consent to legall and, to execute	f contact between myself and th of fact and commitments of every k of rights and releases of liabilities y binding modifications, conditions documents on my behalf which are ly applies to this specific zoning req	ind on my behalf; grant legally of every kind on my behalf; to , and exceptions on my behalf; e legally binding on me. This
that my agent has less that personally participate in the this application are part of statements made by may Killeen, its officers, age words and actions from my property is owned by a	an full authority to act, then the application of the application. I under the disposition of the application. I under the an official proceeding of City govern agent. Therefore, I agree to hold ents, employees, and third parties all damages, attorney fees, interest a corporation, partnership, venture, or os binding appointment on behalf of the	zed agent. At any time it should appear tion may be suspended and I will have to erstand that all communications related to rnment and, that the City will rely upon harmless and indemnify the City of who act in reliance upon my agent's and costs arising from this matter. If other legal entity, then I certify that I have e entity, and every reference herein to 'I',
Signature of Agent		Title
		Date
		Title
$^{'}$ Signature of Applicant $\mathscr{C}$	duca 4 James	Date
Printed/Typed Name of Ap	plicant Colorga F. Jam	Date 11-22+5
Signature of Property Own	er Educa F. James	Title owner
Printed/Typed Name of Pro	operty Owner, COLICA F. Ja	m = 5 Date 11-22-15
Signature of Property Own	er Mileon fines	Title Owner
Printed/Typed Name of Pro	pperty Owner Ahmony L. 3	James Date 11-2-218
Signature of Property Own	er	Title
Printed/Typed Name of Pro	pperty Owner	Date
4.4		

\*Application must be signed by the individual applicant, by each partner of a partnership, or by an officer of a corporation or association.



### City of Killeen Zoning Change Application

[] General Zoning Change \$300.00 [] Conditional Use Permit \$500.00

	Name(s) of Property Owner:	KEPHART, KENNETH W ET	UX BETTY J	
	Current Address: 6606 REIN D	)R		
	City: KILLEEN	State: TX	Zip: 76	5542-9045
N	City: KILLEEN  Home Phone: 3463437	45 Business Phone: ()	Cell Phone: ()	
X	Email: KHE PhAN	STO LOT. RK.	com	
	Name of Applicant:			
		(If different than	Property Owner)	
	Address:			
	City:	State:	Zip:	
	Home Phone: ()	_Business Phone: (	Cell Phone ()	·
	Email:			
	Address/Location of property to	be rezoned: 6606 REIN DRI	VE KILLEEN, TX 7654	2-9045
	Legal Description: WAGON WI	HEEL SUBDIVISION, BLOCK	004, LOT 0010	
		Metes & Bounds	or Lot(s) Block	Subdivision
	Is the rezone request consister	nt with the Comprehensive Pla	in? YES	
	Type of Ownership: X	Sole OwnershipPartnersl	nipCorporation _	Other
	Present Zoning: R1	Present Use: RESIDENTIA	L, SINGLE	
	Proposed Zoning: SR2	Proposed Use: RESIDENT	IAL, SINGLE	
	Conditional Use Permit for:			
	This property was conveyed to c Page <u>oo617</u> , Instrument N (Attached)	owner by deed dated	and record of the Bell Cou	ded in Volume <u>Ø2/25</u> , nty Deed Records.
	Is this the first rezoning applicat YesX (Fee n	ion on a unilaterally annexed tr ot required) No	act? (Submit required fe	ee)

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:

City:	State:	Zip:	= ==
Home Phone: ()	Business Phone: ()		Email:
I acknowledge and affirm signature below, I fully au	n that I will be legally bound the thorize my agent to:	by the words and	acts of my agent, and by r
representations binding waivers consent to legal and, to execute	of contact between myself of fact and commitments of of rights and releases of lial ly binding modifications, con documents on my behalf wl ly applies to this specific zon	every kind on my pilities of every l ditions, and exce nich are legally l	y behalf; grant legally kind on my behalf; to eptions on my behalf;
that my agent has less the personally participate in the	ity will deal only with a fully a an full authority to act, then the ne disposition of the application. of an official proceeding of Cit	application may b I understand tha	e suspended and I will have at all communications related
statements made by may Killeen, its officers, age words and actions from my property is owned by a	y agent. Therefore, I agree to the the third parts, employees, and third parts all damages, attorney fees, it is corporation, partnership, vento is binding appointment on behalf	o hold harmless arties who act i nterest and costs are, or other legal	s and indemnify the City of neliance upon my agent sarising from this matter.  entity, then I certify that I have
statements made by may Killeen, its officers, age words and actions from my property is owned by a legal authority to make thi 'my', or 'me' is a reference	y agent. Therefore, I agree to the	o hold harmless arties who act in terest and costs are, or other legal all of the entity, an	s and indemnify the City of reliance upon my agent s arising from this matter. entity, then I certify that I have devery reference herein to be
statements made by may Killeen, its officers, age words and actions from my property is owned by a legal authority to make thi 'my', or 'me' is a reference Signature of Agent	y agent. Therefore, I agree to the the third parts, employees, and third parts all damages, attorney fees, is a corporation, partnership, vento is binding appointment on behale to the entity.	o hold harmless arties who act interest and costs are, or other legal of the entity, and	s and indemnify the City on reliance upon my agent is arising from this matter. entity, then I certify that I have devery reference herein to '
statements made by may Killeen, its officers, age words and actions from my property is owned by a legal authority to make thi 'my', or 'me' is a reference Signature of AgentPrinted/Typed Name of Ag Signature of Agent	y agent. Therefore, I agree to the ents, employees, and third pall damages, attorney fees, is a corporation, partnership, vento is binding appointment on behale to the entity.	o hold harmless arties who act interest and costs are, or other legal all of the entity, and	s and indemnify the City on reliance upon my agent is arising from this matter. entity, then I certify that I have devery reference herein to '
statements made by may Killeen, its officers, age words and actions from my property is owned by a legal authority to make thi 'my', or 'me' is a reference Signature of Agent Printed/Typed Name of Agent Printed/Typed Name of Agent	y agent. Therefore, I agree to the ents, employees, and third pall damages, attorney fees, is a corporation, partnership, ventous binding appointment on behale to the entity.	o hold harmless arties who act interest and costs are, or other legal of the entity, and	s and indemnify the City of reliance upon my agent s arising from this matter. entity, then I certify that I have devery reference herein to '  Title Date
statements made by may Killeen, its officers, age words and actions from my property is owned by a legal authority to make thi 'my', or 'me' is a reference Signature of Agent Printed/Typed Name of Agent Printed/Typed Name of Agent	y agent. Therefore, I agree to the ents, employees, and third pall damages, attorney fees, is a corporation, partnership, ventous binding appointment on behale to the entity.	no hold harmless arties who act interest and costs are, or other legal lift of the entity, an	s and indemnify the City of reliance upon my agent s arising from this matter. entity, then I certify that I have devery reference herein to be a compared to the compared to
statements made by may Killeen, its officers, age words and actions from my property is owned by a legal authority to make thi 'my', or 'me' is a reference Signature of AgentPrinted/Typed Name of Ag Signature of Agent	y agent. Therefore, I agree to the ents, employees, and third pall damages, attorney fees, is a corporation, partnership, vento is binding appointment on behave to the entity.  The ent	no hold harmless arties who act interest and costs are, or other legal of the entity, and	s and indemnify the City of reliance upon my agent is arising from this matter. entity, then I certify that I have devery reference herein to be a compared to
statements made by may Killeen, its officers, age words and actions from my property is owned by a legal authority to make thi 'my', or 'me' is a reference Signature of AgentPrinted/Typed Name of Ag Signature of Applicant	y agent. Therefore, I agree to the ents, employees, and third possible a corporation, partnership, ventous binding appointment on behave to the entity.  The entity opplicant of the entity of the ent	no hold harmless arties who act interest and costs are, or other legal of the entity, and	s and indemnify the City of reliance upon my agent is arising from this matter.  entity, then I certify that I have devery reference herein to be a compared to the compared t
statements made by may Killeen, its officers, age words and actions from my property is owned by a legal authority to make thi 'my', or 'me' is a reference Signature of AgentPrinted/Typed Name of Ag Signature of ApplicantPrinted/Typed Name of Ap Printed/Typed Name of Ap	y agent. Therefore, I agree to ents, employees, and third pall damages, attorney fees, is a corporation, partnership, ventous binding appointment on behave to the entity.  The policinal of the policinal of the entity of the en	no hold harmless arties who act interest and costs are, or other legal of the entity, and	s and indemnify the City of reliance upon my agent is arising from this matter. entity, then I certify that I have devery reference herein to be a compared to
statements made by may Killeen, its officers, age words and actions from my property is owned by a legal authority to make thi 'my', or 'me' is a reference.  Signature of Agent  Printed/Typed Name of Age Signature of Applicant  Printed/Typed Name of Age Signature of Applicant  Printed/Typed Name of Applicant  Printed/Typed Name of Applicant	y agent. Therefore, I agree to ents, employees, and third pall damages, attorney fees, is a corporation, partnership, ventous binding appointment on behave to the entity.  The policient of the entity of the entit	no hold harmless arties who act interest and costs are, or other legal of the entity, and	s and indemnify the City on reliance upon my agent is arising from this matter.  entity, then I certify that I have devery reference herein to be devery reference herein to be developed.  Title  Date  Title  Date  Title  Date  Title  Date  Title  Date  Title  Owner  Title  Owner
statements made by may Killeen, its officers, age words and actions from my property is owned by a legal authority to make thi 'my', or 'me' is a reference.  Signature of Agent	y agent. Therefore, I agree to the ents, employees, and third possible a corporation, partnership, ventous binding appointment on behave to the entity.  I agent the entity of the entit	no hold harmless arties who act interest and costs are, or other legal of the entity, and	s and indemnify the City on reliance upon my agent is arising from this matter.  entity, then I certify that I have devery reference herein to be devery reference herein to be developed.  Title  Date
statements made by may Killeen, its officers, age words and actions from my property is owned by a legal authority to make thi 'my', or 'me' is a reference Signature of Agent	y agent. Therefore, I agree to ents, employees, and third part all damages, attorney fees, is a corporation, partnership, ventuis binding appointment on behave to the entity.  The property Owner Agent Coperty Owner Bally Agent	no hold harmless arties who act interest and costs are, or other legal of the entity, and	s and indemnify the City on reliance upon my agent is arising from this matter.  entity, then I certify that I have devery reference herein to be devery reference herein to be developed.  Title  Date  Title  Date  Title  Date  Title  Date  Title  Date  Title  Owner  Title  Owner

\*Application must be signed by the individual applicant, by each partner of a partnership, or by an officer of a corporation or association.



Date Paid: Amount Paid: Cash/MO #/Check #: Receipt #:	\$ #
--	---------

# City of Killeen Zoning Change Application

[] General Zoning Change \$300.00 [] Conditional Use Permit \$500.00

Name(s) of Property Owner:	KEYSER, DAVID F	R ETUX LOTT	TIE M	
Current Address: 6602 WAGO	ON WHEEL DR			
City: KILLEEN				76542-9057
Home Phone: 25/213-20-				
Email:				
Name of Applicant:				-
	(If diff	erent than Pr	operty Owner)	
Address:				
City:				
Home Phone: (_)	_Business Phone: (		Cell Phone (	)
Email:		<u>.</u>		
Address/Location of property to	be rezoned: 6602	WAGON WH	EEL DR KILLEE	N, TX 76542-9057
Legal Description: WAGON W	HEEL SUBDIVISION	N, BLOCK 001	, LOT 0010	
	Metes & B	ounds or	Lot(s) Block	Subdivision
Is the rezone request consiste	nt with the Compreh	ensive Plan?	YES	
Type of Ownership: X	Sole Ownership	_Partnership	Corporation	Other
Present Zoning: R1	Present Use: RES	SIDENTIAL, S	SINGLE	
Proposed Zoning: SR2	Proposed Use: _F	RESIDENTIAL	L, SINGLE	
Conditional Use Permit for:	<del></del>			
This property was conveyed to Page <u>OOG//</u> , Instrument N (Attached)	owner by deed dated Number	2/2/19	89and rec of the Bell C	orded in Volume <u>62,265</u> , ounty Deed Records.
ls this the first rezoning applicat	tion on a unilaterally a not required) N	annexed tract	? _(Submit require	d fee)

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:

Mailing Address:

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:

City: \_\_\_\_\_ State: \_\_\_\_ Zip: \_\_\_ -

Home Phone: (\_\_\_) \_\_\_\_\_Business Phone: (\_\_\_) \_\_\_\_\_Email: \_\_\_\_

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 act, 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 'I', 'my', or 'me' is a reference to the entity.

Signature of Agent	Title
Printed/Typed Name of Agent	Date
Signature of Agent	Title
Printed/Typed Name of Agent?	Date
X Signature of Applicant Little Language	Title from aun
Printed/Typed Name of Applicant Draw Cheysti	Date 17-15
➤ Signature of Property Owner ( cuttle	Title Khucker
Printed/Typed Name of Property Owner	Date 1/-/5-/5
Signature of Property Owner	
Printed/Typed Name of Property Owner	
Signature of Property Owner	Title
Printed/Typed Name of Property Owner	Date

<sup>\*</sup>Application must be signed by the individual applicant, by each partner of a partnership, or by an officer of a corporation or association.



Date Paid: Amount Paid: Cash/MO #/Check #: Receipt #:	\$ #
--	---------

## City of Killeen Zoning Change Application

Name(s) of Property Owner:	MEADORS, SANDRA		
Current Address: 6508 REIN D	R		
City: KILLEEN	State: TX	Zip:	76542- 9039
Home Phone: ( )	_Business Phone: ()	Cell Phone: (	)
Email:			
Name of Applicant:	(If different than F		
	(If different than F	Property Owner)	
Address:			55
City:	State:	Zip:	
Home Phone: ()	_Business Phone: (	Cell Phone (	)
Email:			
Address/Location of property to	be rezoned: 6508 REIN DR KII	LLEEN, TX 76542-	9039
Legal Description: WAGON WI	HEEL SUBDIVISION, BLOCK 00	03, LOT 0009	
	Metes & Bounds or		
Is the rezone request consister	nt with the Comprehensive Plan	? YES	
Type of Ownership: X	Sole OwnershipPartnership	Corporation	Other
Present Zoning: R1	_ Present Use:RESIDENTIAL,	SINGLE	
Proposed Zoning: SR2	Proposed Use:RESIDENTIA	AL, SINGLE	
Conditional Use Permit for:			
This property was conveyed to o Page <u>OO/69</u> , Instrument N (Attached)	owner by deed dated <u>4/8/19</u> lumber	and red of the Bell C	orded in Volume <u>02639</u> ounty Deed Records.
Is this the first rezoning applicati	on on a unilaterally annexed trac ot required) Nb		d fee)

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: \_\_\_\_\_

City:	State:	Zip:		
Home Phone: ()	Business Phone: ()		Email:	
I acknowledge and affirm signature below, I fully auth	that I will be legally bound torize my agent to:	y the words and	acts of my a	agent, and by r
representations of binding waivers o consent to legally and, to execute d	contact between myself f fact and commitments of f rights and releases of lial binding modifications, con ocuments on my behalf w applies to this specific zon	every kind on my pilities of every ditions, and exc nich are legally	y behalf; gra kind on my k eptions on m	nt legally behalf; to by behalf;
that my agent has less than personally participate in the this application are part of	will deal only with a fully a full authority to act, then the disposition of the application an official proceeding of Cit	application may be application may be application in a function in a fun	be suspended at all communi nd, that the C	and I will have ications related ity will rely upon
words and actions from a my property is owned by a control of the	ts, employees, and third p Il damages, attorney fees, i corporation, partnership, vento binding appointment on beha	arties who act in terest and cost are, or other legal	in reliance u ts arising from entity, then I	pon my agent m this matter. certify that I have
Killeen, its officers, agen words and actions from a my property is owned by a clegal authority to make this 'my', or 'me' is a reference to	ts, employees, and third p Il damages, attorney fees, i corporation, partnership, vento binding appointment on beha	arties who act interest and cost ure, or other legal of the entity, ar	in reliance us arising from the entity, then I and every refer	pon my agent m this matter. certify that I have ence herein to
Killeen, its officers, agen words and actions from a my property is owned by a clegal authority to make this 'my', or 'me' is a reference to Signature of Agent	ts, employees, and third p Il damages, attorney fees, i corporation, partnership, vento binding appointment on beha to the entity.	arties who act interest and cost ure, or other legal of the entity, ar	in reliance us arising from entity, then I and every reference.  Title	pon my agent m this matter. certify that I have ence herein to
Killeen, its officers, agen words and actions from a my property is owned by a clegal authority to make this 'my', or 'me' is a reference to Signature of Agent	ts, employees, and third p Il damages, attorney fees, i corporation, partnership, vento binding appointment on beha to the entity.	arties who act interest and cost ure, or other legal lf of the entity, ar	in reliance us arising from entity, then I and every reference.  Title Date	pon my agent m this matter. certify that I have ence herein to
Killeen, its officers, agen words and actions from a my property is owned by a clegal authority to make this 'my', or 'me' is a reference to Signature of Agent Printed/Typed Name of Agent Printed/Typed Name of Agent	ts, employees, and third p II damages, attorney fees, i corporation, partnership, vento binding appointment on beha to the entity.	arties who act interest and cost ure, or other legal lf of the entity, ar	in reliance us arising from entity, then I and every reference Title Date Title Date Date	pon my agent m this matter. certify that I have ence herein to
Killeen, its officers, agen words and actions from a my property is owned by a clegal authority to make this 'my', or 'me' is a reference to Signature of Agent	ts, employees, and third p II damages, attorney fees, i corporation, partnership, venti binding appointment on beha to the entity.	arties who act interest and cost ure, or other legal lf of the entity, ar	in reliance us arising from entity, then I and every reference — Title — Date — Title	pon my agent m this matter. certify that I havence herein to
Killeen, its officers, agen words and actions from a my property is owned by a clegal authority to make this 'my', or 'me' is a reference to Signature of Agent	ts, employees, and third p II damages, attorney fees, i corporation, partnership, venti binding appointment on beha to the entity.  Int  Int  Int  Int  Int  Int  Int  In	arties who act interest and cost ure, or other legal lf of the entity, ar	in reliance us arising from entity, then I and every reference — Title — Date — Date	pon my agent m this matter. certify that I have ence herein to
Killeen, its officers, agen words and actions from a my property is owned by a clegal authority to make this 'my', or 'me' is a reference to Signature of Agent	ts, employees, and third p II damages, attorney fees, i corporation, partnership, vento binding appointment on beha to the entity.	arties who act interest and cost ure, or other legal lf of the entity, ar	in reliance us arising from entity, then I and every reference — Title — Date — Date	pon my agent m this matter. certify that I ha ence herein to
Killeen, its officers, agen words and actions from a my property is owned by a clegal authority to make this 'my', or 'me' is a reference to Signature of Agent	ts, employees, and third p II damages, attorney fees, i corporation, partnership, venti binding appointment on beha to the entity.  Int  Lack Me due icant Sanara Me	arties who act interest and cost ure, or other legal lif of the entity, ar	in reliance us arising from entity, then I and every reference — Title — Date — Title — Ti	pon my agent m this matter. certify that I hat ence herein to
Killeen, its officers, agen words and actions from a my property is owned by a clegal authority to make this 'my', or 'me' is a reference to Signature of Agent	ts, employees, and third pll damages, attorney fees, is corporation, partnership, ventional binding appointment on behavior the entity.  Int	arties who act interest and cost ure, or other legal of the entity, are calculated as a calcul	in reliance us arising from entity, then I and every reference of the control of	bonea    1-22-15
Killeen, its officers, agen words and actions from a my property is owned by a clegal authority to make this 'my', or 'me' is a reference to Signature of Agent	ts, employees, and third p II damages, attorney fees, i corporation, partnership, venti binding appointment on beha to the entity.  Int  Int  Sandra M  erty Owner Sandra	arties who act interest and cost interest and cost ire, or other legal if of the entity, are	in reliance us arising from the entity, then I and every reference of the entity and every every entity and every every entity and every entity and every entity and every entity and every entity entity entity every entity	bonea  1-22-15  owner
Killeen, its officers, agen words and actions from a my property is owned by a clegal authority to make this 'my', or 'me' is a reference to Signature of Agent	ts, employees, and third pll damages, attorney fees, is corporation, partnership, ventional binding appointment on behavior the entity.  Int	arties who act interest and cost ure, or other legal of the entity, are called a cost of the entity.	in reliance us arising from entity, then I and every reference of the control of	bonea  1-22-15  owner

\*Application must be signed by the individual applicant, by each partner of a partnership, or by an officer of a corporation or association.



## City of Killeen Zoning Change Application

[] General Zoning Change \$300.00 [] Conditional Use Permit \$500.00

Name(s) of Property Owner:	PLUNKETT, BARBARA ANN	& LEE KENT
Current Address: 32502 2ND 2	AVE SW	
City: FEDERAL WAY	State: WA	Zip: 98023-5606
Email: 1Kaika77	EMSN.COM	
	(If different than	Property Owner)
Address:		
City:	State:	Zip:
Home Phone: ()	Business Phone: (	Cell Phone ()
Email:		
Address/Location of property to	be rezoned: 6501 REIN DR K	ILLEEN, TX 76542
Legal Description: WAGON W	HEEL SUBDIVISION, BLOCK (	002, LOT 0006
	Metes & Bounds of	r Lot(s) Block Subdivision
Is the rezone request consiste	nt with the Comprehensive Pla	n? <u>YES</u>
Type of Ownership: X	Sole OwnershipPartnersh	ipCorporationOther
Present Zoning: R1	Present Use: RESIDENTIAL	, SINGLE
Proposed Zoning: SR2	Proposed Use:RESIDENTI	AL, SINGLE
Conditional Use Permit for:		
This property was conveyed to Page732, Instrument N (Attached) Dec Numb	owner by deed dated 9/6/ Number 3/028	$\frac{\sqrt{20/1}}{20}$ and recorded in Volume $\frac{\sqrt{2927}}{208}$ , of the Bell County Deed Records.
Is this the first rezoning applicat Yes X (Fee r	ion on a unilaterally annexed tra	act? (Submit required fee)

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:

Mailing Address:			
City:	State:	Zip:	:=1
Home Phone: ()	Business Phone: (	_)	Email:
I acknowledge and affirm signature below, I fully author	that I will be legally bou orize my agent to:	und by the words and	acts of my agent, and by my
representations of binding waivers o consent to legally and, to execute d	contact between mystifact and commitment frights and releases of binding modifications ocuments on my beha applies to this specific	s of every kind on my of liabilities of every i , conditions, and exce alf which are legally i	y behalf; grant legally kind on my behalf; to eptions on my behalf;
that my agent has less than personally participate in the this application are part of statements made by may Killeen, its officers, agen words and actions from a my property is owned by a contract.	full authority to act, ther disposition of the applican official proceeding agent. Therefore, I agests, employees, and the lidamages, attorney for corporation, partnership, binding appointment on	n the application may be ation. I understand that of City government and ree to hold harmlessird parties who act it es, interest and cost venture, or other legal	t. At any time it should appear be suspended and I will have to at all communications related to ad, that the City will rely upon a and indemnify the City of in reliance upon my agent's arising from this matter. If entity, then I certify that I have and every reference herein to 'I',
Signature of Agent			Title
			Date
Signature of Agent			Title
			Date
Signature of Applicant			Title
Printed/Typed Name of Appl	icant Barbara	Ann Plunkot	+ Date 11/16/2015
Signature of Property Owner	Inban 4	1 Ven Grets	Title
Printed/Typed Name of Prop	1	(Promote II)	++ Date 11/16/2015
Signature of Property Owner	Lu K. B		Title
Printed/Typed Name of Prop	erty Owner		Date
			Title
			Date
*Application must be signed b	y the individual applicant,	by each partner of a p	partnership, or by an officer of a

corporation or association.

Revised October 2015

2



Date Paid: Amount Paid: Cash/MO #/Check #:	\$
Receipt#:	#

# City of Killeen Zoning Change Application

[] General Zoning Change \$300.00 [] Conditional Use Permit \$500.00

Name(s) of Property Owner: Rabsatt, Reuben & Padine (Confidential Own
Current Address: 6513 Reig
V' City V' / 1860
Home Phone: () Sty 634-3480 Business Phone: ( ) Cell Phone: ( )
Email: Parline Rabsatt @ gahor. com
Name of Applicant:(If different than Property Owner)
(If different than Property Owner)
Address:
City: State: Zip:
Home Phone: ()Business Phone: ()Cell Phone ()
Email:
Address/Location of property to be rezoned:
Legal Description:
Metes & Bounds or Lot(s) Block Subdivision
Is the rezone request consistent with the Comprehensive Plan? YES NO
Type of Ownership:Sole OwnershipPartnershipCorporationOther
Present Zoning: RI Present Use: Single Residental
Proposed Zoning: SR2 Proposed Use: Single Residential
Conditional Use Permit for:
This property was conveyed to owner by deed dated and recorded in Volume Page, Instrument Number 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)

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 \_\_\_\_\_ City: \_\_\_\_\_\_ State: \_\_\_\_\_ Zip: -\_\_\_\_\_ Home Phone: ( \_\_\_ Business Phone: \_\_\_ Email: \_\_\_\_\_ 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 act, 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 'l', 'my', or 'me' is a reference to the entity. Signature of Agent \_\_\_\_\_\_\_Title \_\_\_\_\_\_ Printed/Typed Name of Agent \_\_\_\_\_ Date \_\_\_\_\_ Signature of Agent Title \_\_\_\_\_ Printed/Typed Name of Agent \_\_\_ Date > Printed/Typed Name of Applicant Signature of Property Owner ain Signature of Property Owner Jen Printed/Typed Name of Property Owner REUBEN Signature of Property Owner Mount Printed/Typed Name of Property Owner RE46E~ #.

\*Application must be signed by the individual applicant, by each partner of a partnership, or by an officer of a

Revised October 2015

corporation or association.



Date Paid: Amount Paid: Cash/MO #/Check #: Receipt #:	\$ #
--	---------

# City of Killeen Zoning Change Application

Name(s) of Property Owner:	ROBINSON, LINDA G	·	
Current Address: 6609 REIN I	OR		
City: KILLEEN	State: TX	Zip:	76542 - 9054
Home Phone: 254-526-3			
Email:			
Name of Applicant:			
	(If different tha	n Property Owner)	
Address:			
City:			
Home Phone: ()	Business Phone: (	Cell Phone (	)
Email:			
Address/Location of property to	be rezoned: 6609 REIN DR	KILLEEN, TX 76542	-9054
Legal Description: WAGON W	HEEL SUBDIVISION, BLOCK	C 002, LOT 0018	
	Metes & Bounds	or Lot(s) Block	Subdivision
Is the rezone request consiste	nt with the Comprehensive Pl	an? <u>YE\$</u>	
Type of Ownership: X	Sole OwnershipPartners	shipCorporation	Other
Present Zoning: R1	Present Use: RESIDENTIA	AL, SINGLE	
Proposed Zoning: SR2	Proposed Use:RESIDENT	ΓΙΑL, SINGLE	
Conditional Use Permit for:			
This property was conveyed to Page <u>//o/25</u> , Instrument N (Attached)			
Is this the first rezoning applicat Yes (Fee r	ion on a unilaterally annexed to trequired)	tract? (Submit require	d fee)

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: Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_ Zip: \_\_\_\_\_ Home Phone: (\_\_\_) \_\_\_\_\_Business Phone: (\_\_\_) \_\_\_\_\_Email: \_\_\_\_ 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 act, 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 'l', 'my', or 'me' is a reference to the entity. Signature of Agent \_\_\_\_\_\_ Title Printed/Typed Name of Agent Date Signature of Agent \_\_\_\_\_ Title Printed/Typed Name of Agent \_\_\_\_ Date Signature of Applicant \_\_\_\_ Title (JU)/LO 1 Printed/Typed Name of Applicant Date //-2-20

Printed/Typed Name of Property Owner \_\_\_\_\_ Date \_\_\_\_\_

Printed/Typed Name of Property Owner \_\_\_\_\_\_ Date \_\_\_\_\_

Printed/Typed Name of Property Owner Linda G Robinsonpate 11-2-2015

Revised October 2015

Signature of Property Owner

Signature of Property Owner \_\_\_\_\_

Signature of Property Owner

Title CTNN 25

\_\_\_\_\_Title

<sup>\*</sup>Application must be signed by the individual applicant, by each partner of a partnership, or by an officer of a corporation or association.



Date Paid: Amount Paid: Cash/MO #/Check #: Receipt #:	\$ #
Receipt#:	

# City of Killeen Zoning Change Application

[] General Zoning Change \$300.00 [] Conditional Use Permit \$500.00

	Name(s) of Property Owner:	RUSSELL, ERNEST T JR ET	TUX ANYA K	
	Current Address: 604 DOUBL	ETREE DR		
	City: KILLEEN	State: TX	Zip: 7654	12- 9009
Y	Home Phone: \$54 554-7	351 Business Phone: ()	Cell Phone: (54) (	581-6485
У		20 @ Yahor. Com		
	Name of Applicant:	1		
		(If different tha	n Property Owner)	
	Address:			
	City:			
	Home Phone: ()	Business Phone: (	Cell Phone ()	
	Email:			
	Address/Location of property to	be rezoned: 604 DOUBLET:	REE DR KILLEEN, TX 765	542-9009
	Legal Description: WAGON W	HEEL SUBDIVISION, BLOCK	. 004, LOT 0003	
		Metes & Bounds	ar Lot(s) Block	Subdivision
	Is the rezone request consiste	nt with the Comprehensive PI	an? <u>YES</u>	
	Type of Ownership: X	Sole OwnershipPartners	shipCorporation	Other
	Present Zoning: R1	Present Use:RESIDENTIA	AL, SINGLE	
	Proposed Zoning: SR2	Proposed Use:RESIDENT	TIAL, SINGLE	
	Conditional Use Permit for:		· · · · · · · · · · · · · · · · · · ·	
	This property was conveyed to Page <u>00358</u> , Instrument I (Attached)	owner by deed dated	and recorded of the Bell Count	d in Volume _ <i>_0_22_6_3</i> y Deed Records.
	Is this the first rezoning applica Yes (Fee I	tion on a unilaterally annexed to trequired)	tract? (Submit required fee	)

As owner of the subject property, I hereby appoint the person designated below to act for me, as my agent in this request.

City:	State: Zi	p:	
Home Phone: ()	Business Phone: ()	Email:	
I acknowledge and affir signature below, I fully a	rm that I will be legally bound by the vulthorize my agent to:	words and acts of my agent, and I	by m
representations binding waiver consent to lega and, to execute	of contact between myself and the soffact and commitments of every less of rights and releases of liabilities ally binding modifications, conditions educuments on my behalf which aronly applies to this specific zoning required.	cind on my behalf; grant legally of every kind on my behalf; to , and exceptions on my behalf; e legally binding on me. This	
that my agent has less the personally participate in	City will deal only with a fully authoring than full authority to act, then the application. I under the disposition of the application.	tion may be suspended and I will har erstand that all communications rela	ave to
Killeen, its officers, ag words and actions from my property is owned by	of an official proceeding of City gove ay agent. Therefore, I agree to hold gents, employees, and third parties in all damages, attorney fees, interest a corporation, partnership, venture, or on this binding appointment on behalf of the exe to the entity.	I harmless and indemnify the Ci who act in reliance upon my ag and costs arising from this matt other legal entity, then I certify that I	upor ity of gent's ter. I
statements made by ma Killeen, its officers, ag words and actions from my property is owned by legal authority to make the 'my', or 'me' is a reference	ay agent. Therefore, I agree to hold gents, employees, and third parties in all damages, attorney fees, interest a corporation, partnership, venture, or this binding appointment on behalf of the ce to the entity.	I harmless and indemnify the Ci who act in reliance upon my ag and costs arising from this matt other legal entity, then I certify that I e entity, and every reference herein	upon ity of gent's ter. It have to 'I',
statements made by mackilleen, its officers, agwords and actions from my property is owned by legal authority to make the my', or 'me' is a reference.  Signature of Agent	ay agent. Therefore, I agree to hold gents, employees, and third parties in all damages, attorney fees, interest a corporation, partnership, venture, or only behalf of the see to the entity.	I harmless and indemnify the Ci who act in reliance upon my ag and costs arising from this matt other legal entity, then I certify that I e entity, and every reference herein	upon ity of gent's ter. If have to 'I',
statements made by mackilleen, its officers, agwords and actions from my property is owned by legal authority to make the my', or 'me' is a reference.  Signature of Agent	ay agent. Therefore, I agree to hold gents, employees, and third parties in all damages, attorney fees, interest a corporation, partnership, venture, or chis binding appointment on behalf of the see to the entity.	I harmless and indemnify the Ci who act in reliance upon my ag and costs arising from this matt other legal entity, then I certify that I e entity, and every reference herein  Title  Date  Title	upon ity of gent's ter. If have to 'l',
statements made by mackilleen, its officers, agwords and actions from my property is owned by legal authority to make the my', or 'me' is a reference.  Signature of Agent  Printed/Typed Name of A Signature of Agent	ay agent. Therefore, I agree to hold gents, employees, and third parties in all damages, attorney fees, interest a corporation, partnership, venture, or chis binding appointment on behalf of the ce to the entity.  Agent	I harmless and indemnify the Ci who act in reliance upon my ag and costs arising from this matt other legal entity, then I certify that I e entity, and every reference herein  Title	upon ity of gent's ter. If have to 'I',
statements made by mackilleen, its officers, agwords and actions from my property is owned by legal authority to make the my', or 'me' is a reference.  Signature of Agent  Printed/Typed Name of A Signature of Agent	ay agent. Therefore, I agree to hold gents, employees, and third parties in all damages, attorney fees, interest a corporation, partnership, venture, or chis binding appointment on behalf of the ce to the entity.  Agent	I harmless and indemnify the Ci who act in reliance upon my ag and costs arising from this matt other legal entity, then I certify that I e entity, and every reference herein  Title	upon ity of gent's ter. If have to 'I',
statements made by mackilleen, its officers, agwords and actions from my property is owned by legal authority to make the my', or 'me' is a reference.  Signature of Agent  Printed/Typed Name of A Signature of Agent	ay agent. Therefore, I agree to hold gents, employees, and third parties in all damages, attorney fees, interest a corporation, partnership, venture, or chis binding appointment on behalf of the ce to the entity.  Agent	I harmless and indemnify the Ci who act in reliance upon my ag and costs arising from this matt other legal entity, then I certify that I e entity, and every reference herein  Title	upon ity of gent's ter. If have to 'I',
statements made by mackilleen, its officers, agwords and actions from my property is owned by legal authority to make the my', or 'me' is a reference.  Signature of Agent  Printed/Typed Name of A Signature of Agent	ay agent. Therefore, I agree to hold gents, employees, and third parties in all damages, attorney fees, interest a corporation, partnership, venture, or chis binding appointment on behalf of the ce to the entity.  Agent	I harmless and indemnify the Ci who act in reliance upon my ag and costs arising from this matt other legal entity, then I certify that I e entity, and every reference herein  Title	upon ity of gent's ter. If have to 'I',
statements made by ma Killeen, its officers, ag words and actions from my property is owned by legal authority to make the my', or 'me' is a reference.  Signature of Agent	ay agent. Therefore, I agree to hold gents, employees, and third parties in all damages, attorney fees, interest a corporation, partnership, venture, or chis binding appointment on behalf of the ce to the entity.  Agent	I harmless and indemnify the Ci who act in reliance upon my age and costs arising from this matter better legal entity, then I certify that I defentity, and every reference herein  Title  Date	upor ity of gent's ter. I have to 'I'
statements made by ma Killeen, its officers, ag words and actions from my property is owned by legal authority to make the my', or 'me' is a reference.  Signature of Agent	ay agent. Therefore, I agree to hold gents, employees, and third parties in all damages, attorney fees, interest a corporation, partnership, venture, or chis binding appointment on behalf of the se to the entity.  Agent  Agent  Applicant  App	I harmless and indemnify the Ci who act in reliance upon my ag and costs arising from this matt other legal entity, then I certify that I e entity, and every reference herein  Title  Date	upor ity or gent's ter. I have to 'l'
statements made by mackilleen, its officers, agwords and actions from my property is owned by legal authority to make the my', or 'me' is a reference.  Signature of Agent	ay agent. Therefore, I agree to hold gents, employees, and third parties in all damages, attorney fees, interest a corporation, partnership, venture, or chis binding appointment on behalf of the se to the entity.  Agent  Agent  Applicant  App	I harmless and indemnify the Ci who act in reliance upon my age and costs arising from this matter the legal entity, then I certify that I defentity, and every reference herein  Title  Date  Title  Title  Date  Title  Date  Title  Date  Title  Title  Date  Title  Date  Title	upor ity of gent's ter. I have to 'I'
statements made by mackilleen, its officers, agwords and actions from my property is owned by legal authority to make the my', or 'me' is a reference.  Signature of Agent	ay agent. Therefore, I agree to hold gents, employees, and third parties in all damages, attorney fees, interest a corporation, partnership, venture, or chis binding appointment on behalf of the se to the entity.  Agent	I harmless and indemnify the Ci who act in reliance upon my age and costs arising from this matter other legal entity, then I certify that I defentity, and every reference herein Title  Date  Title  Date	upor ity of gent's ter. I have to 'I',

2



Date Paid: Amount Paid: Cash/MO #/Check #: Receipt #:	\$ #
--	---------

## City of Killeen Zoning Change Application

### [] General Zoning Change \$300.00 [] Conditional Use Permit \$500.00

Name(s) of Property Owne	TURNER, ROOSEVELT JR E	ETUX SONIA A	
Current Address: 6511 REI	N DR		
City: KILLEEN	State: TX	Zip: 7654	2- 9041
	Business Phone: ()		
	(If different tha		
	(If different tha	n Property Owner)	
Address:			
City:	State:	Zip:	
Home Phone: ()	Business Phone: (	Cell Phone ()	
Email:			
Address/Location of property	to be rezoned: 6511 REIN DR	KILLEEN, TX 76542-9041	
Legal Description: WAGON	WHEEL SUBDIVISION, BLOCK	. 002, LOT 0011	
	Metes & Bounds	or Lot(s) Block	Subdivision
Is the rezone request consis	stent with the Comprehensive Pl	an? <u>YES</u>	
Type of Ownership: X	Sole OwnershipPartners	shipCorporation	Other
Present Zoning: R1	Present Use: RESIDENTIA	AL, SINGLE	
Proposed Zoning: SR2	Proposed Use: RESIDENT	ΓΙΑL, SINGLE	
Conditional Use Permit for: _			
This property was conveyed Page <u>00329</u> , Instrumer (Attached)	to owner by deed dated <u>名/</u> ショ nt Number	and recorded of the Bell County	in Volume <u>62206</u> y Deed Records.
	cation on a unilaterally annexed to the not required)		

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: \_\_\_\_\_\_

Mailing Address: \_\_\_\_\_

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:

City: \_\_\_\_\_ State: \_\_\_\_ Zip: \_\_\_ -

Home Phone: (\_\_\_) \_\_\_\_\_Business Phone: (\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_

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 act, 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 'l', 'my', or 'me' is a reference to the entity.

	Signature of Agent	_ Title
	Printed/Typed Name of Agent	Date
	Signature of Agent/	Title
	Printed/Typed Name of Agent	_ Date
X	Signature of Applicant to crope Lungs	_ Title
X	Printed/Typed Name of Applicant Koossele Lustree	Date Control
$\times$	Signature of Property Owner Wilsewals Lungar	Title Owner
X	Printed/Typed Name of Property Owner 1005000 Nurger	Date 15 Nous
	Signature of Property Owner	_ Title
	Printed/Typed Name of Property Owner	Date
	Signature of Property Owner	_ Title
	Printed/Typed Name of Property Owner	Date

<sup>\*</sup>Application must be signed by the individual applicant, by each partner of a partnership, or by an officer of a corporation or association.



Date Paid: Amount Paid: Cash/MO #/Check #: Receipt #:	\$ #
--	---------

# City of Killeen Zoning Change Application

Name(s) of Property Owner: WASHINGTON, JENNIE FAY
Current Address: 6515 REIN DR
City:         KILLEEN         State:         TX         Zip:         76542-9041
Home Phone: 254-245465Business Phone: (Cell Phone: (
Email:
Name of Applicant:
(If different than Property Owner)
Address:
City: Zip:
Home Phone: (Business Phone: (Cell Phone ()
Email:
Address/Location of property to be rezoned: 6515 REIN DR KILLEEN, TC 76542-9041
Legal Description: WAGON WHEEL SUBDIVISION, BLOCK 002, LOT 0013
Metes & Bounds or Lot(s) Block Subdivision
s the rezone request consistent with the Comprehensive Plan? YES
Type of Ownership: X Sole Ownership Partnership Corporation Other
Present Zoning: R1 Present Use: RESIDENTIAL, SINGLE
Proposed Zoning: SR2 Proposed Use: RESIDENTIAL, SINGLE
Conditional Use Permit for:
This property was conveyed to owner by deed dated
s this the first rezoning application on a unilaterally annexed tract?  (es X (Fee not required)

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: \_\_\_\_ Mailing Address: City: \_\_\_\_\_ State: \_\_\_\_ Zip: \_\_ -Home Phone: (\_\_\_) \_\_\_\_\_Business Phone: (\_\_\_) \_\_\_\_\_Email: \_\_\_\_\_ 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 act, 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 'I'. 'my', or 'me' is a reference to the entity. Signature of Agent \_\_\_\_\_\_ Title\_\_\_\_\_ Printed/Typed Name of Agent \_\_\_\_\_\_ Date \_\_\_\_\_ Signature of Agent \_\_\_\_\_ Printed/Typed Name of Agent \_\_\_ \_\_\_\_ Date \_\_\_\_ - Signature of Applicant Jensey War \_\_\_\_ Title Outpiver Printed/Typed Name of Applicant JENNIO DUASHING TOW Date 11-4-13 - Signature of Property Owner Jense Wahingto Title Dwever Printed/Typed Name of Property Owner TENNIO (18) HSHENGTON Date 11-4-15 Signature of Property Owner \_\_\_\_Title Printed/Typed Name of Property Owner \_\_\_\_\_\_ Date \_\_\_\_\_

Printed/Typed Name of Property Owner \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_ Title

Revised October 2015

Signature of Property Owner \_\_\_\_\_

<sup>\*</sup>Application must be signed by the individual applicant, by each partner of a partnership, or by an officer of a corporation or association.



Date Paid: Amount Paid: Cash/MO #/Check #: Receipt #:	\$ #

# City of Killeen Zoning Change Application

	Name(s) of Property Owner: WASHINGTON, KIRK W ETUX LYNN A
	Current Address: 6203 REIN DR
	City: KILLEEN State: TX Zip: 76542
X	Home Phone: ( )3384825 Business Phone: ( _ ) Cell Phone: 759338-53/2
>	Email: MISSIELA@AOL.COM
	Name of Applicant:
	(If different than Property Owner)
	Address:
	Dity: State: Zip:
	Home Phone: (Business Phone: (Cell Phone ()
	Email:
	ddress/Location of property to be rezoned: 6503 REIN DR KILLEEN, TX 76542
	egal Description: WAGON WHEEL SUBDIVISION, BLOCK 002, LOT 0007
	Metes & Bounds or Lot(s) Block Subdivision
	s the rezone request consistent with the Comprehensive Plan? YES
	ype of Ownership: X Sole Ownership Partnership Corporation Other
	resent Zoning: R1 Present Use: RESIDENTIAL, SINGLE
	roposed Zoning: SR2 Proposed Use: RESIDENTIAL, SINGLE
	onditional Use Permit for:
	his property was conveyed to owner by deed dated 7/19/2001 and recorded in Volume 4442, age 571, Instrument Number of the Bell County Deed Records.
,	this the first rezoning application on a unilaterally annexed tract?  ≈X(Fee not required) No(Submit required fee)

Mailing Address			
City:	State:	Zip:	
Home Phone: ()	Business Phone: ()_	Email:	
I acknowledge and affire signature below, I fully at	m that I will be legally bound by tuthorize my agent to:	the words and acts of r	ny agent, and by
representations binding waivers consent to legal and, to execute	of contact between myself and of fact and commitments of events of rights and releases of liability binding modifications, condited documents on my behalf which applies to this specific zoning	ery kind on my behalf; ties of every kind on n ions, and exceptions o h are legally binding o	grant legally ny behalf; to n my behalf;
that my agent has less the personally participate in the	ity will deal only with a fully aut an full authority to act, then the ap he disposition of the application.	plication may be suspendunderstand that all comm	ded and I will have nunications related
statements made by ma Killeen, its officers, ag- words and actions from my property is owned by	of an official proceeding of City of ay agent. Therefore, I agree to ents, employees, and third part all damages, attorney fees, interaction, partnership, venture, its binding appointment on behalf of	hold harmless and indices who act in reliance rest and costs arising or other legal entity, the	demnify the City e upon my agent from this matter. en I certify that I ha
statements made by ma Killeen, its officers, agwords and actions from my property is owned by legal authority to make the 'my', or 'me' is a reference	of an official proceeding of City of ay agent. Therefore, I agree to ents, employees, and third part all damages, attorney fees, interaction, partnership, venture, its binding appointment on behalf of the entity.	hold harmless and incides who act in reliance erest and costs arising , or other legal entity, the of the entity, and every re	demnify the City e upon my agent from this matter. en I certify that I ha eference herein to
statements made by ma Killeen, its officers, agwords and actions from my property is owned by legal authority to make the 'my', or 'me' is a reference.  Signature of Agent	of an official proceeding of City of ay agent. Therefore, I agree to ents, employees, and third part all damages, attorney fees, interaction accorporation, partnership, venture, his binding appointment on behalf of the entity.	hold harmless and indictes who act in reliance rest and costs arising , or other legal entity, the of the entity, and every remarks.	demnify the City e upon my agent from this matter. en I certify that I hat eference herein to
statements made by ma Killeen, its officers, ag words and actions from my property is owned by legal authority to make th 'my', or 'me' is a reference  Signature of Agent  Printed/Typed Name of Agent	of an official proceeding of City of agent. Therefore, I agree to ents, employees, and third part all damages, attorney fees, interest a corporation, partnership, venture, his binding appointment on behalf of the entity.	hold harmless and incides who act in reliance erest and costs arising , or other legal entity, the of the entity, and every reference	demnify the City e upon my agent from this matter. en I certify that I hat eference herein to
statements made by ma Killeen, its officers, ag words and actions from my property is owned by legal authority to make th 'my', or 'me' is a reference  Signature of Agent  Printed/Typed Name of Ag Signature of Agent	of an official proceeding of City of agent. Therefore, I agree to ents, employees, and third part all damages, attorney fees, interaction all damages, attorney fees, interaction, partnership, venture, his binding appointment on behalf of the entity.	hold harmless and incides who act in reliance erest and costs arising or other legal entity, the of the entity, and every reliable.  Title Da Title	demnify the City e upon my agent from this matter. en I certify that I hat eference herein to
statements made by ma Killeen, its officers, ag words and actions from my property is owned by legal authority to make th 'my', or 'me' is a reference  Signature of Agent  Printed/Typed Name of Ag Signature of Agent	of an official proceeding of City of agent. Therefore, I agree to ents, employees, and third part all damages, attorney fees, interaction all damages, attorney fees, interaction, partnership, venture, his binding appointment on behalf of the entity.	hold harmless and incides who act in reliance erest and costs arising or other legal entity, the of the entity, and every reliable.  Title Da Title	demnify the City e upon my agent from this matter. en I certify that I hat eference herein to
statements made by ma Killeen, its officers, ag words and actions from my property is owned by legal authority to make th 'my', or 'me' is a reference  Signature of Agent  Printed/Typed Name of Ag Signature of Agent	of an official proceeding of City of agent. Therefore, I agree to ents, employees, and third part all damages, attorney fees, interaction all damages, attorney fees, interaction, partnership, venture, his binding appointment on behalf of the entity.	hold harmless and incides who act in reliance erest and costs arising or other legal entity, the of the entity, and every reliable.  Title Da Title	demnify the City e upon my agent from this matter. en I certify that I hat eference herein to
statements made by ma Killeen, its officers, ag words and actions from my property is owned by legal authority to make th 'my', or 'me' is a reference  Signature of Agent  Printed/Typed Name of Ag Signature of Agent	of an official proceeding of City of agent. Therefore, I agree to ents, employees, and third part all damages, attorney fees, interest a corporation, partnership, venture, his binding appointment on behalf of the entity.  I gent	hold harmless and incides who act in reliance erest and costs arising or other legal entity, the of the entity, and every reliable to the entity of the enti	demnify the City e upon my agent from this matter. en I certify that I hat eference herein to
statements made by ma Killeen, its officers, ag words and actions from my property is owned by legal authority to make th 'my', or 'me' is a reference  Signature of Agent Printed/Typed Name of Ag Signature of Agent Printed/Typed Name of Ag Signature of Applicant Printed/Typed Name of Ag Signature of Applicant Signature of Property Owr	of an official proceeding of City of agent. Therefore, I agree to ents, employees, and third part all damages, attorney fees, interest a corporation, partnership, venture, his binding appointment on behalf of the entity.  I gent	hold harmless and incides who act in reliance rest and costs arising or other legal entity, the of the entity, and every restriction.  Titter  Date of the entity of the e	te 15 Nov 15
statements made by ma Killeen, its officers, ag words and actions from my property is owned by legal authority to make th 'my', or 'me' is a reference  Signature of Agent Printed/Typed Name of Ag Signature of Applicant Printed/Typed Name of Ag Signature of Property Own Printed/Typed Name of Pr	of an official proceeding of City of agent. Therefore, I agree to ents, employees, and third part all damages, attorney fees, interest a corporation, partnership, venture, his binding appointment on behalf of the entity.  Gent	hold harmless and incides who act in reliance trest and costs arising or other legal entity, the of the entity, and every response to the entity of the enti	te
statements made by ma Killeen, its officers, ag words and actions from my property is owned by legal authority to make th 'my', or 'me' is a reference  Signature of Agent Printed/Typed Name of Ag Signature of Applicant Printed/Typed Name of Ag Signature of Property Owr Printed/Typed Name of Property Owr Printed/Typed Name of Property Owr	of an official proceeding of City of agent. Therefore, I agree to ents, employees, and third part all damages, attorney fees, interpretation, partnership, venture, his binding appointment on behalf of the to the entity.  I gent	hold harmless and incides who act in reliance erest and costs arising or other legal entity, the of the entity, and every respectively.  Titted Dar Dar Titted Dar	te 15 NOV 15  The Uwner Let 15 NOV 15
statements made by ma Killeen, its officers, ag words and actions from my property is owned by legal authority to make th 'my', or 'me' is a reference  Signature of Agent Printed/Typed Name of Ag Signature of Applicant Printed/Typed Name of Ag Signature of Property Owr Printed/Typed Name of Property Owr Printed/Typed Name of Property Owr	of an official proceeding of City of agent. Therefore, I agree to ents, employees, and third part all damages, attorney fees, interest a corporation, partnership, venture, its binding appointment on behalf of the to the entity.  I gent	Titles who act in reliance who act in reliance who act in reliance when	te 15 NOV 15  The Uwner Let 15 NOV 15

Revised October 2015

corporation or association.