



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

CASE #: 216-16

City of Killeen Zoning Change Application

General Zoning Change [] Conditional Use Permit

Name(s) of Property Owner: Thayne & Rikki Bright
 Current Address: 21880 Wolfridge Road
 City: Killeen State: TX Zip: 76549
 Home Phone: (254) 793-0124 Business Phone: (254) 681-3747 Cell Phone: (254) 289-9638
 Email: RiKBright@aol.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: 3901 & 4001 Robinett Rd,
 Legal Description: Attached

Metes & Bounds or Lot(s) Block Subdivision

Is the rezone request consistent with the Comprehensive Plan? (YES) NO
 Type of Ownership: X Sole Ownership ___ Partnership ___ Corporation ___ Other
 Present Zoning: ARI Present Use: Residential
 Proposed Zoning: B3 Proposed Use: _____
 Conditional Use Permit for: _____

This property was conveyed to owner by deed dated 10-23-2015 and recorded in Volume 545 & 896
 Page 280 & 624, Instrument Number 2015-00041072 of the Bell County Deed Records.
 (Attached)

Is this the first rezoning application on a unilaterally annexed tract?
 Yes X (Fee not required) No _____ (Submit required fee)

APPOINTMENT OF AGENT

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

Name of Agent: Quintero Engineering, LLC
Mailing Address: P.O. Box 4386
City: Killeen State: TX Zip: 76541
Home Phone: () Business Phone: (254) 493-0744 Email: pquintero@quinteroeng.com

RB
7/20/16

I acknowledge and affirm that I will be legally bound by the words and acts of my agent, and by my signature below, I fully authorize my agent to:

be the point of contact between myself and the City: make legally binding representations of fact and commitments of every kind on my behalf; grant legally binding waivers of rights and releases of liabilities of every kind on my behalf; to consent to legally binding modifications, conditions, and exceptions on my behalf; and, to execute documents on my behalf which are legally binding on me. This authorization only applies to this specific zoning request.

I understand that the City will deal only with a fully authorized agent. At any time it should appear that my agent has less than full authority to ace, then the application may be suspended and I will have to personally participate in the disposition of the application. I understand that all communications related to this application are part of an official proceeding of City government and, that the City will rely upon statements made by may agent. Therefore, I agree to hold harmless and indemnify the City of Killeen, its officers, agents, employees, and third parties who act in reliance upon my agent's words and actions from all damages, attorney fees, interest and costs arising from this matter. If my property is owned by a corporation, partnership, venture, or other legal entity, then I certify that I have legal authority to make this binding appointment on behalf of the entity, and every reference herein to 'I', 'my', or 'me' is a reference to the entity.

Signature of Agent	<u><i>[Signature]</i></u>	Title	<u>President</u>
Printed/Typed Name of Agent	<u>Pedro Quinto</u>	Date	<u>7/20/16</u>
Signature of Applicant	_____	Title	_____
Printed/Typed Name of Applicant	_____	Date	_____
Signature of Property Owner	<u><i>[Signature]</i></u>	Title	_____
Printed/Typed Name of Property Owner	<u>Thayne Bright</u>	Date	<u>7/16/16</u>
Signature of Property Owner	<u><i>[Signature]</i></u>	Title	_____
Printed/Typed Name of Property Owner	<u>Rikki Bright</u>	Date	<u>7-16-2016</u>
Signature of Property Owner	_____	Title	_____
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.