



Date Paid:	6/16/2017
Amount Paid:	\$ 100.00
Cash/MO #/Check #:	#
Receipt #:	0541

CASE #: FLUM 217-18

City of Killeen FLUM Amendment Application

Name(s) of Property Owner: GARLAND KELLEY JO ANN KELLEY

Current Address: 410 TOWER HILL LN

City: KILLEEN State: TX Zip: 76842

Home Phone: (254) 684297 Business Phone: (254) 6816818 Cell Phone: 254 681-0963

Email: CTWS@ga @ EMBARG 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 proposed for FLUM amendment: _____

Legal Description: VOL 1303 PAGE 64 VOL 874 PAGE 630

Metes & Bounds or Lot(s) Block Subdivision

Type of Ownership: Sole Ownership Partnership Corporation Other

Present FLUM Designation: SUBURBAN COMMERCIAL ESTIMATE Present Use: AG

Proposed FLUM Designation: GENERAL RESIDENTIAL Proposed Use: SINGLE FAMILY

This property was conveyed to owner by deed dated _____ and recorded in Volume 1303, Page 64, Instrument Number _____ of the Bell County Deed Records. (Attached)

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: LEE KELLEY

Mailing Address: 410 TOWER HILL LN

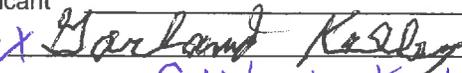
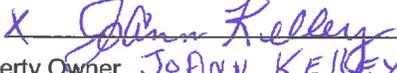
City: KILLEEN State: TX Zip: 76542

Home Phone: ²⁵⁴ (634-2917) Business Phone: ²⁵⁴ (681-6819) Email: CTWSC9M@EMBARGMAHC.CO

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 FLUM amendment 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 my 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></u>	Title _____
Printed/Typed Name of Agent <u>LEE KELLEY</u>	Date <u>6-16-2017</u>
Signature of Agent _____	Title _____
Printed/Typed Name of Agent _____	Date _____
Signature of Applicant _____	Title _____
Printed/Typed Name of Applicant _____	Date _____
Signature of Property Owner <u>X </u>	Title _____
Printed/Typed Name of Property Owner <u>GARLAND KELLEY</u>	Date <u>6-16-2017</u>
Signature of Property Owner <u>X </u>	Title _____
Printed/Typed Name of Property Owner <u>JOANN KELLEY</u>	Date <u>6-16-2017</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.