

Date Paid: Amount Paid: Cash/MO #/Check #: Receipt #: \$ 300.00 # 1477 522

CASE #: 17-14

City of Killeen Zoning Change Application

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

Name(s) of Property Owner: Emmons Investments, GP
Current Address: 4003 W. Starl Schlueter Loop, Suite 4
City: Killeen State: TX Zip: 76549.
Home Phone: () Business Phone: () Cell Phone: (254) 200 - 1748
Email: mike. emmons @ Egemmons. com
Name of Applicant: Ling Chital, R.E. Belton Engineering, Inc. (If different than Property Owner)
Address: 106 N. East Street
City: Belton State: TX zip: 76513
Home Phone: ()Business Phone: 254 131-5icCC Cell Phone ()
Email: <u>beltonengineeringine @ amail.com</u>
Address/Location of property to be rezoned: 2900 W. Elms Road
Legal Description: Let 1, Block 9, Roberts Addition, Section Three Amended
Metes & Bounds or Lot(s) Block Subdivision
Is the rezone request consistent with the Comprehensive Plan? YES NO If NO, a FLUM amendment application must be submitted.
Type of Ownership:Sole Ownership Partnership CorporationOther
Present Zoning: 8-5 Present Use: Vaccunt
Proposed Zoning: R-2 Proposed Use: Auplexes
Conditional Use Permit for:
This property was conveyed to owner by deed dated <u>c2/19/2003</u> and recorded in Volume <u>4924</u> Page <u>476</u> , 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)

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. Belton Engineering, Inc. -5600 Email: beltonengineeringinc 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 Printed/Typed Name of Agent Lina Chial Signature of Agent _ Printed/Typed Name of Agent ___ Signature of Applicant _ Printed/Typed Name of Applicant Date Signature of Property Owner Printed/Typed Name of Property Owner Michael Signature of Property Owner Printed/Typed Name of Property Owner Date Signature of Property Owner

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

Revised October 2015

Printed/Typed Name of Property Owner ___

Date