

Date Paid: Amount Paid: Cash/MO #/Check #: Receipt #: 5/5/2017 \$ 100-00 # 177 532

CASE #: FLUM 217-17

## City of Killeen FLUM Amendment Application

Name(s) of Property Owner: Catstrong (CC
Name(s) of Property Owner:
Current Address: 900 Ranch Road G20 Sulh Soile Upd 1744
City: State: Zip:   8 / 3 - 1
Home Phone: ( )Business Phone (2) 5971488 Cell Phone: (57 8577488
Email: Cric & catstrongtx.com
Name of Applicant: Eric 5 J 55
(If different than Property Owner)
Address:
City: State: Zip:
Home Phone: ()Business Phone: ()Cell Phone_()
Email:
Address/Location of property proposed for FLUM amendment: 16942 State (15 huey 195 Killery TE
Address/Location of property proposed for FLUM amendment: 16942 State (1,5 hung 195 Killery, TX Legal Description: 1958 FRANIC KENNEDY 4,504,700 (177,19,9)2034
Metes & Bounds ) or Lot(s) Block Subdivision
ill
Present FLUM Designation: RURAL Present Use: flumbry, fc, Retration Present Use: flumbry, fc, Retration
Proposed FLUM Designation: General (commercial Proposed Use:
This property was conveyed to owner by deed dated and recorded in Volume, Page, 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: State: \_\_\_\_ Home Phone: (\_\_\_) \_\_\_\_\_ Business Phone: ( ) I acknowledge and affirm that I will be legally bound by the words and acts of my agent, and by my signature below, I fully authorize my agent to: be the point of contact between myself and the City: make legally binding representations of fact and commitments of every kind on my behalf; grant legally binding waivers of rights and releases of liabilities of every kind on my behalf; to consent to legally binding modifications, conditions, and exceptions on my behalf; and, to execute documents on my behalf which are legally binding on me. This authorization only applies to this specific 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 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 Pricoss Date SISIN Signature of Agent \_\_\_\_\_\_ Title\_\_\_\_\_ Printed/Typed Name of Agent \_\_\_\_\_\_ Date \_\_\_\_\_ \_\_\_\_\_\_\_Title \_\_\_\_\_ Signature of Applicant \_\_\_\_\_ Printed/Typed Name of Applicant \_\_\_\_\_\_ Date \_\_\_\_\_ Signature of Property Owner \_\_\_\_\_ Printed/Typed Name of Property Owner \_\_\_\_\_\_ Date \_\_\_\_\_ \_\_\_\_\_\_ Title \_\_\_\_\_ Signature of Property Owner Printed/Typed Name of Property Owner \_\_\_\_\_\_ Date \_\_\_\_\_ 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

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corporation or association.

Dated: 10-05-2015