



# APPEAL TO THE ZONING BOARD OF ADJUSTMENT

## Development Services Department

2406 Leopard St. Corpus Christi, TX 78408 | Phone: 361.826.3240 | zoning@cctexas.com

<b>1.</b>	Applicant/Representative: _____ Telephone: (____) _____ Address (City, State, Zip): _____ E-mail Address: _____ Cell Phone: (____) _____
<b>2.</b>	Property Owner(s): _____ Telephone: (____) _____ Address (City, State, Zip): _____ E-mail Address: _____ Cell Phone: (____) _____ Ownership Type: <input type="checkbox"/> Sole <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> Other: _____
<b>3.</b>	Request: <input type="checkbox"/> Special Use Exception <input type="checkbox"/> Variance <input type="checkbox"/> Appeal of Administrative Decision Reason for Request: _____ Project Address: _____ Area of Request (sq. ft./acres): _____ 12-Digit Nueces County Tax ID: _____ - _____ - _____ Existing Use: _____ If platted, Subdivision Name: _____ Block: _____ Lot(s): _____ Legal description: _____
<b>4.</b>	<b>DOCUMENTS ATTACHED</b> REQUIRED: <input type="checkbox"/> Appeal Statement <input type="checkbox"/> Disclosure of Interest <input type="checkbox"/> Copy of Warranty Deed  IF APPLICABLE: <input type="checkbox"/> Executed Appointment of Agent <input type="checkbox"/> Site Plan <input type="checkbox"/> Metes and bounds if request is for a portion of a platted lot or an unplatted lot
I certify that the information provided is accurate, correct and signed by all owners.	
_____ (Owner's Signature)	_____ (Applicant's Signature)
_____ (Owner's Printed Name)	_____ (Applicant's Printed Name)
All signatures on this application shall be original signatures. No copied prints or faxed copies. <b>INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED</b>	
<b>Office Use Only</b>	Date Received: _____ Received By: _____ ADP: _____ Filing Fee: <u>\$636.50</u> Case No.: _____ Map No.: _____

*\*A maximum of five applications are scheduled per hearing. Applications received after the five maximum will be scheduled to the next available meeting.*

Hearing Location: **City Hall Council Chambers, 1201 Leopard Street at 1:30 p.m.**

\* Board of Adjustment Hearing Date: \_\_\_\_\_



# DISCLOSURE OF INTERESTS

## Development Services Department

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City of Corpus Christi Ordinance 17112, as amended, requires all persons or firms seeking to do business with the City to provide the following information. Every question must be answered. If the question is not applicable, answer with "NA".

**NAME:** \_\_\_\_\_

**STREET:** \_\_\_\_\_ **CITY:** \_\_\_\_\_ **ZIP:** \_\_\_\_\_

**FIRM is:**  Corporation  Partnership  Sole Owner  Association  Other \_\_\_\_\_

### DISCLOSURE QUESTIONS

If additional space is necessary, please use the reverse side of this page or attach separate sheet.

1. State the names of each "employee" of the City of Corpus Christi having an "ownership interest" constituting 3% or more of the ownership in the above named "firm".

Name	Job Title and City Department (if known)
_____	_____
_____	_____

2. State the names of each "official" of the City of Corpus Christi having an "ownership interest" constituting 3% or more of the ownership in the above named "firm".

Name	Title
_____	_____
_____	_____

3. State the names of each "board member" of the City of Corpus Christi having an "ownership interest" constituting 3% or more of the ownership in the above named "firm".

Name	Board, Commission, or Committee
_____	_____
_____	_____

4. State the names of each employee or officer of a "consultant" for the City of Corpus Christi who worked on any matter related to the subject of this contract and has an "ownership interest" constituting 3% or more of the ownership in the above named "firm".

Name	Consultant
_____	_____
_____	_____

### CERTIFICATE (To Be Notarized)

I certify that all information provided is true and correct as of the date of this statement, that I have not knowingly withheld disclosure of any information requested; and that supplemental statements will be promptly submitted to the City of Corpus Christi, Texas as changes occur.

Certifying Person: \_\_\_\_\_ Title: \_\_\_\_\_

(Print)

Signature of Certifying Person: \_\_\_\_\_ Date: \_\_\_\_\_



## DEFINITIONS

### Development Services Department

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- a. "Board Member". A member of any board, commission or committee appointed by the City Council of the City of Corpus Christi, Texas.
- b. "Employee". Any person employed by the City of Corpus Christi, Texas, either on a full or part time basis, but not as an independent contractor.
- c. "Firm". Any entity operated for economic gain, whether professional, industrial or commercial and whether established to produce or deal with a product or service, including but not limited to, entities operated in the form of sole proprietorship, as self-employed person, partnership, corporation, joint stock company, joint venture, receivership or trust and entities which, for purposes of taxation, are treated as non-profit organizations.
- d. "Official". The Mayor, members of the City Council, City Manager, Deputy City Manager, Assistant City Managers, Department and Division Heads and Municipal Court Judges of the City of Corpus Christi, Texas.
- e. "Ownership Interest". Legal or equitable interest, whether actually or constructively held, in a firm, including when such interest is held through an agent, trust, estate or holding entity. "Constructively held" refers to holding or control established through voting trusts, proxies or special terms of venture or partnership agreements.
- f. "Consultant". Any person or firm, such as engineers and architects, hired by the City of Corpus Christi for the purpose of professional consultation and recommendation.



# **APPEAL STATEMENT**

(For Zoning Board of Adjustment Use)

## **Development Services Department**

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Complete purpose of request statement shall contain the following information:

1. State the purpose of the request and include applicable background information as to the development plan for the property, i.e., usage of property, number and square footage(s) of existing and/or proposed building(s)/unit(s), building(s)/unit(s) height, parking plans/spaces, phasing schedule of development, number of employee(s) associated with the office, business or industrial development, hours of operation, modification or demolition plans for existing structure(s), type, area and setback of signage, etc. Explain in detail how all required findings of the Unified Development Code, section 3.25.3.A. are met.

2. Identify the existing land uses adjoining the area of request:

North -  
South -  
East -  
West -