



Project Application (Page 1 of 3)

City of Fredericksburg - Development Services Department
126 W. Main St., Fredericksburg, TX 78624 – (830)997-7521

A. Project Information (Please complete all items)

Project Name: _____

Project Address: _____

Tax ID Number (s): _____

Application Type (Check all items that apply.)

- | | | |
|---|--|--|
| <input type="checkbox"/> Conditional Use Permit | <input type="checkbox"/> Minor Plat* | <input type="checkbox"/> Plat Vacation |
| <input type="checkbox"/> Site Plan* | <input type="checkbox"/> Replat* | <input type="checkbox"/> Annexation* |
| <input type="checkbox"/> Zoning Change | <input type="checkbox"/> Amending Plat* | <input type="checkbox"/> Other |
| <input type="checkbox"/> Land Use Plan Change | <input type="checkbox"/> Preliminary Plat* | <input type="checkbox"/> Waiver of Right to
30-day action |
| <input type="checkbox"/> Variance Request | <input type="checkbox"/> Final Plat* | |
| | <input type="checkbox"/> Development Plat | |

Revision of Approved Plan/Plat? ___ Yes ___ No Name: _____

Jurisdiction: ___ City Limits ___ ETJ Total Acres: _____ No. of Lots _____

Original Survey & Abstract No.: _____

Legal Description: _____

Current Land Use Plan: _____ Proposed Land Use Plan: _____

Current Zoning: _____ Proposed Zoning: _____

Location: _____

Proposed Use(s): _____

Applicant's Signature

Applicant's Role: ___ Owner ___ Developer ___ Other: _____ (note role)

I hereby certify that the information supplied with this application is true and correct, and that the paper and electronic copies of the materials submitted are consistent with each other, to the best of my knowledge. I also certify I have authorization from the owner to act on his / her behalf.

Signature: _____

Printed Name: _____ Date: _____

Staff Use Only Application No.: _____ Date: _____

*Copy of current Title Search required with application



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B. Contact Information (please complete all items – attach additional pages as necessary)

I. Property Owner(s)

Firm Name (if applicable): _____

Owner Name: _____

Address: _____

Phone: _____ Fax: _____ Email: _____

II. Owner's Agent/Engineer/Surveyor (main contact person responsible for application)

Role: _____ Agent _____ Engineer _____ Surveyor _____ Other (note role)

Firm Name (if applicable): _____

Address: _____

Primary Contact Name: _____

Phone: _____ Fax: _____ Email: _____

Secondary Contact Name: _____

Phone: _____ Fax: _____ Email: _____

III. Applicant

Firm Name (if applicable): _____

Applicant Name (s): _____

Address: _____

Phone: _____ Fax: _____ Email: _____

IV. Applicant's Agent/Engineer/Surveyor (main contact person responsible for application)

Role: _____ Agent _____ Engineer _____ Surveyor _____ (note role)

Firm Name (if applicable): _____

Address: _____

Primary Contact Name: _____

Phone: _____ Fax: _____ Email: _____



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C. Fee Schedule (please attach appropriate fee to application)

_____	Conditional Use Permit Application - \$200
_____	Site Plan Application - \$200
_____	Application for Zoning Change - \$200
_____	Application for Land Use Change - \$200
_____	Variance Request - \$100
_____	Minor Plat - \$200
_____	Replat - \$200
_____	Amending Plat - \$200
_____	Preliminary Plat - \$200 plus \$20 per lot
_____	Final Plat - \$500 plus \$10 per lot

D. Recording Fee Schedule

For plats, a recording fee will be collected when mylars are presented. The check should be made payable to Gillespie County Clerk and the recording fees are \$121.00 for a single lot plat. Each additional lot will increase the recording fee by \$10.00.