

**APPLICATION FOR ZONING CHANGE**  
**City of Canton, Texas**

**Instructions:** Please type or print and fill out completely. Should you need additional space, attach extra sheets.

1. APPLICANT: \_\_\_\_\_ PHONE #: \_\_\_\_\_

Address: \_\_\_\_\_

2. AGENT OR ATTORNEY: \_\_\_\_\_ PHONE #: \_\_\_\_\_

Address: \_\_\_\_\_

3. ZONING REQUEST: FROM: \_\_\_\_\_ TO: \_\_\_\_\_

4. PROPERTY DESCRIPTION: (Lot(s); Block(s); Name of Subdivision or Addition & Physical Address)

\_\_\_\_\_

(If description is by metes and bounds, please attach on separate sheet(s).)

5. PRESENT USE OF LAND/PROPERTY (If vacant land, so state): \_\_\_\_\_

\_\_\_\_\_

6. PROPOSED DEVELOPMENT & REASONS FOR ZONING REQUEST: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

7. STATUS OF APPLICANT (If other than owner, attach a written authority from owner):

(a) OWNER \_\_\_\_\_

(b) TRUSTEE \_\_\_\_\_ (List name of individuals for whom property is held in trust)

\_\_\_\_\_

(c) CORPORATION \_\_\_\_\_ (List names & titles of officers & names of board of directors)

\_\_\_\_\_

(d) If application is made by someone other than the above, please indicate relationship between applicant and owner, if any, or the capacity in which the applicant is submitting the application. (e.g. prospective purchaser, tenant, relative, etc.) \_\_\_\_\_

8. FILING FEE: \$150.00 (Make check payable to the City of Canton)

9. Mail or bring application (along with filing fee) to the City Hall, City of Canton, 290 E. Tyler Street, P.O. Box 245, Canton, TX 75103. Please include a plat of the property.

\_\_\_\_\_ Date

\_\_\_\_\_ Signature of Applicant

*Revised 02/05*