

Zoning District Change for Specific Use Permit
City of Euless
201 N. Ector Drive
Euless, Texas
817-685-1684

PART 1. APPLICANT INFORMATION			
BUSINESS OWNER (Legal Entity): <u>EZCO Auto Express care dba Express Lube</u> Official Address to send all City correspondence: <u>2740 W. EULESS BLVD Suite</u> City: <u>EULESS</u> State: <u>TX</u> Zip: <u>76040</u> Applicant/Agent Name: <u>AMBASAJER ASFAHA</u> Mailing Address: <u>2740 W. EULESS BLVD</u> Suite: _____ City: <u>EULESS</u> State: <u>TX</u> Zip: <u>76040</u> Telephone (817) <u>545-6400</u> Fax (817) <u>545 3652</u> Email Address: <u>EZCO Expresscare@SBC Global.net</u>			
PROPERTY OWNER (Please print): <u>AMBASAJER - ASFAHA</u> Signature: <u>[Signature]</u> Mailing Address: <u>2740 W. EULESS BLVD</u> Suite: _____ City: <u>EULESS</u> State: <u>TX</u> Zip: <u>76040</u> Telephone (817) <u>545-6400</u> Fax (817) <u>545 3652</u> Email Address: <u>EZCO Expresscare@SBC Global.net</u>			
PART 2. PURPOSE OF PROPOSAL			
<input checked="" type="checkbox"/> Amend Zoning Regulations contained in section <u>Special Use permit TX 10</u> <input type="checkbox"/> Amend the Official Zoning Map by changing _____ acres of land currently zoned _____ to be zoned _____ In what ways have conditions changed substantially since the current zoning was set for this property? <u>ALLOW Lube Shop</u> How would the proposed amendment promote the public welfare and encourage orderly city development? <u>Keep the development of Small Business Along S.H. 10 IN TX 10 CORRIDOR</u>			
PART 3. PROPERTY DESCRIPTION			
Street Address of Property (if available): <u>2740 W. EULESS BLVD, EULESS TX 76040</u> LEGAL DESCRIPTION: Subdivision Name <u>St. Michael</u> Block(s) <u>A</u> Lot(s) <u>6</u> Survey Name(s): _____ Abstract No(s): _____ Tract(s): _____			
PART 4. PRESENT USE OF PROPERTY (CIRCLE ONE)			
VACANT LAND VACANT BUILDING SINGLE FAMILY DWELLING COMMERCIAL MULTI-FAMILY DWELLINGS INDUSTRIAL OTHER: _____			
PART 5. ACKNOWLEDGMENTS			
I certify that the above information is correct and complete to the best of my knowledge and ability and that I will be fully prepared to present the above proposal at a Planning and Zoning Commission public hearing. I reserve the right to withdraw this proposal at any time by filing a written request with the Department of Planning and Development. I understand that 50% of my application fee will be refunded if my written request for withdrawal is received by the Department within 24 hours after the Planning and Zoning Commission public hearing. Applicant, Owner or Authorized Agent <u>[Signature]</u> Date <u>8/27/08</u>			
OFFICE USE ONLY:			
Case Number: <u>08-12-SUP</u> Zoning Fee: <u>\$125.00</u> Date Submitted: <u>8-27-08</u> Accepted By: <u>HW</u> Current Zoning: <u>TX-10</u> Expiration Date: _____			

