

Specific Use Permit Application
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Specific Use Permit

City of Euless
201 N. Ector Drive
Euless, Texas
817-685-1684

PART 1. APPLICANT INFORMATION	
BUSINESS OWNER (Legal Entity): <u>Waide Delk</u> dba <u>Patriot Motor Company</u>	
Official Address to send all City correspondence: <u>202 Republic Ln.</u> Suite _____	
City: <u>Euless</u> State: <u>Tx</u> Zip: <u>76040</u>	
Applicant/Agent Name: <u>WAIDE DELK</u>	
Mailing Address: <u>202 Republic Ln.</u> Suite: _____	
City: <u>Euless</u> State: <u>Tx</u> Zip: <u>76040</u>	
Telephone (817) <u>690-1699</u> Fax () _____ Email: <u>patriotmotorco@gmail.com</u>	
PROPERTY OWNER (Please print): <u>GT Enterprises</u>	
Signature: _____	
Mailing Address: <u>PO Box 741743</u> Suite: _____	
City: <u>Dallas</u> State: <u>Tx</u> Zip: <u>75243</u>	
Telephone (214) <u>734-5013</u> Fax () _____ Email: _____	
PART 2. PURPOSE OF PROPOSAL	
In what ways have conditions changed substantially since the current zoning was set for this property? _____ _____	
How would the proposed amendment promote the public welfare and encourage orderly city development? _____ _____	
PART 3. PROPERTY DESCRIPTION	
Street Address of Property (if available): <u>1361 West Euless Blvd. Euless, Tx 76040</u>	
LEGAL DESCRIPTION: Subdivision Name <u>Hwy 10 Business Center</u> Block(s) _____ Lot(s) _____	
Survey Name(s): _____ Abstract No(s): _____ Tract(s): _____	
PART 4. PRESENT USE OF PROPERTY (CIRCLE ONE)	
VACANT LAND	<input checked="" type="radio"/> VACANT BUILDING
MULTI-FAMILY DWELLINGS	SINGLE FAMILY DWELLING
	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>Garyf. Cozart - owner</u>	Date <u>11/24/10</u>
OFFICE USE ONLY:	
Case Number: <u>10-14-SUP</u>	Zoning Fee: <u>\$250.00</u> Date Submitted: <u>12-2-10</u>
Accepted By: <u>HH</u>	Current Zoning: <u>C-2</u> Expiration Date: _____
The Development Review Committee WILL NOT REVIEW any drawings that are missing any applicable check list items. Please mark all that apply and submit signed list with the application. Application will not be accepted unless this list is submitted.	