

Specific Use Permit

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

PART 1. APPLICANT INFORMATION	
BUSINESS OWNER (Legal Entity): <u>DOUBLE 9 INVESTMENT dba The Reserve</u>	
Official Address to send all City correspondence: _____ Suite _____	
City: <u>ARLINGTON</u>	State: <u>TX</u> Zip: <u>760</u>
Applicant/Agent Name: <u>BURINDER WALIA</u>	
Mailing Address: <u>2315 Megan Way</u> Suite: _____	
City: <u>Arlington</u>	State: <u>TX</u> Zip: <u>76016</u>
Telephone () _____	Fax () _____ Email: _____
PROPERTY OWNER (Please print): <u>Double 9 Investment</u>	
Signature: _____	
Mailing Address: <u>Dwight</u> Suite: _____	
City: _____	State: _____ Zip: _____
Telephone () _____	Fax () _____ Email: _____
PART 2. PURPOSE OF PROPOSAL	
In what ways have conditions changed substantially since the current zoning was set for this property?	
<u>Request for renewal.</u>	
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>101 W. Glade Rd</u>	
LEGAL DESCRIPTION: Subdivision Name <u>Glade Shopping Center</u> Block(s) <u>1</u> Lot(s) <u>1R1</u>	
Survey Name(s): _____ Abstract No(s): _____ Tract(s): _____	
PART 4. PRESENT USE OF PROPERTY (CIRCLE ONE)	
VACANT LAND	VACANT BUILDING
MULTI-FAMILY DWELLINGS	INDUSTRIAL
SINGLE FAMILY DWELLING	OTHER: _____
<u>COMMERCIAL</u>	
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 _____	Date <u>7-18-11</u>
OFFICE USE ONLY:	
Case Number: <u>11-09-SUP</u>	Zoning Fee: <u>\$1250</u> Date Submitted: <u>7/18/11</u>
Accepted By: <u>AJD</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.	

HTE: 11-30000009