Zoning District Change for Planned Development

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

PART 1. APPLICANT INFORMATION

APPLICANT/AGENT: Bloomfield Homes, L.P. Don Dykstra

Signature:

Mailing Address: 1050 E. Highway 114 Suite #: 210

City: Southlake State: Tx. Zip Code 76092

Telephone ( ) ~~817-416-1372~~ 972-877-1458 Fax ( ) 817-416-1397

Email: don@bloomfieldhomes.net

OWNER: UNIVEST PROPERTIES INC.

Signature:

Mailing Address: 12300 Park Central Drive Suite #:

City: Dallas State: Tx. Zip Code 75251

Telephone ( ) Fax ( )

PART 2. PURPOSE OF PROPOSAL

- ☐ Amend ZONING REGULATIONS contained in section R-1L
- ☐ Amend the OFFICIAL ZONING MAP by changing 5.588 acres of land currently zoned R-1L to be zoned PD.

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): GATEWAY BLVD. & CENTURION WAY

LEGAL DESCRIPTION: Subdivision Name GATEWAY COURT
Block(s) and Lot(s) Block A Lot

Survey Name(s): B. HARRINGTON SURVEY Abstract No(s): 808 Tract(s)

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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_____ Date 7/1/13

Donald J. Dykstra, President
Bloomfield Properties, Inc.
General Partner

OFFICE USE ONLY:

Fee Paid:	Received By:	Date Received:	Case Number:	H.T.E. Number:
$500.00	Alicia D.	7/8/2013	13-01-PD	13-2000001

FORM UPDATED 01/2011

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