

## CITY OF AUSTIN APPLICATION FOR CHANGE IN ZONING

Office Use Only	_	
Date Filed:/	Date Application Fee Paid:/	
Applicant's Name(s):		
Owner's Name(s):		
Contact #:		
Request:		
Property Location:		
Legal Description:		
Business and Professional Zone, General Co	Zone, R-1 Residential Zone, R-2 Residential Zone, Retail-Local Community Business Zone, Limited Industrial Zone, Intense Indust Port Development Zone, Mobile Home Residence Zone	rial
Proposed Zoning:		
Proposed Use and Comments:		- 1
Applicant's Signature:		
Owner's Signature:		