CITY OF CORPUS CHRISTI
DEVELOPMENT SERVICES

REZONING APPLICATION

Submit a record at City of Corpus Christi Rhythm for Civics and upload application form.

Development Services Dept.
2406 Leopard Street
Corpus Christi, TX 78469-9277
(361) 826-3240

FEE WORKSHEET FOR APPLICANT USE ONLY				
	0.00-0.99 ac	1.00-9.99 ac	10-24.99 ac	25.00+ ac
Base Application Fee				
PUD Surcharge				
Special Permit Surcharge				
Zoning Sign Fee				
Public Notice Surcharge				
Total Fees				
Administrative Surcharge (4.5%)				
Total				

* Refer to Development Services Zoning Fees Year 3 or Year 4. Fees are revised periodically.

1. Applicant: _____ Applicant Type: _____ Contact Person :_____

Mailing Address: _____ City _____ State __ __ Zip__ __ __ __ __

E-mail: _____ Cell: (__ __ __) __ __ __-__ __ __ __

2. Property Owner (s): _____ Contact Person :_____

Mailing Address: _____ City _____ State __ __ ZIP__ __ __ __ __

E-mail: _____ Cell: (__ __ __) __ __ __-__ __ __ __

3. Subject Property Address (es): _____ Area of Request:_____ Acres

Geographic ID (Tax ID): __ __ __ __ - __ __ __ __ - __ __ __ __ (Additional sites may be listed, below, at the bottom of the form)

Legal Description: _____

A RPLS signed and sealed Metes and Bounds with Exhibit is required for unplatted property.

Current Zoning District: _____ Requested Zoning District: _____

4. Required Documents:

☐ **Pre-Submission or Early Assistance Meeting** (Date: __ __/__ __/__ __; City Staff(s):_____)

☐ **Land Use Statement Form** ☐ **Disclosure of Interest Form** ☐ **Deed No** _____

Supplemental Documents/Information (AS REQUIRED):

☐ Appointment of Agent Form ☐ Lien Holder Authorization ☐ Site Plan (For PUD or Special Permit)
Pursuant to UDC § 3.5 & § 3.6 criteria

☐ Metes & Bounds Description
Signed and Sealed by a RPLS

☐ Peak Hour Trip (PHT) Form
Pursuant to UDC Section 3.29.4;
For changes to the future land use

☐ Traffic Impact Analysis
Pursuant to UDC § 3.29;
For peak hour trips >500

☐ Related Development Services and/or Other Department Permits:
Land Subdivision (Platting, PI, BCC, etc.)_____ Building/External Permits:_____

5. I certify that I have provided the City of Corpus Christi with a *complete* application for review; that I am authorized to initiate this rezoning as or on behalf of the Property Owner(s); and the information provided is accurate.

_____ _____
Owner or Agent's Signature Applicant's Signature

_____ _____
Owner or Agent's Printed Name Applicant's Printed Name

OFFICE USE ONLY

Case NO. ZN __ __ __ __; Property is ☐Platted/☐Not Platted; District: __; ADP:_____; Planner:_____; TRC: ☐Y ☐ N

PC Hearing: ____/____/____; Notices: __ Inside; __ Outside; __ In Favor; __ Opposed (__%);Action: ____; ____ For, __ Against

City Council: ____/____/____; Notices: __ Inside; __ Outside; __ In Favor; __ Opposed (__%);Action: ____; ____ For, __ Against

Additional Sites/Notes: _____