

ADMINISTRATIVE ADJUSTMENT APPLICATION

Updated: October, 2019

Associated Case/ Permit # _____ - _____ - _____



CONTACT INFORMATION

Applicant's Name		Property Owner	
Company		Company	
Applicant's Mailing Address		Owner's Mailing Address	
Applicant's Phone #		Owner's Phone #	
Applicant's Email		Owner's Email	

PROPERTY INFORMATION

Business Name: _____

Subject Property Address: _____

Zoning District: _____ Tax ID #: R _____

Legal Description: Lot _____ Block _____ Subdivision _____

DESCRIPTION OF REQUEST

To be completed by staff

The following request has been: Approved Denied

by the Director of Planning and Development Services

Signature: _____

Date: _____

Print Name: _____

Title: _____

TO APPLY EMAIL: PLANNINGINFO@SANMARCOSTX.GOV