

City of Eden, Texas Zoning Permit PO Box 915 Eden, TX 76837 Office: 325-869-2211 Fax: 325-869-5075

ZONING PERMIT

PROPERTY INFORMATION	
Date:	Permit #: Z-21-
Permit Fee: \$10.00	Valuation: \$
Building Address:	•
Legal Description (Lot, Block, Subdivision):	
Description of Work to be Performed:	
A sketch, drawing, or diagram of the work to be performed, along with any applicable survey of the property, is <u>REQUIRED</u> at the time of application.	
Front Setbacks:	Back Setbacks:
Side Setbacks:	Restrictions/Comments:
City Zone:	
OWNER INFORMATION	
Owner Name:	Phone:
Owner Address:	City/State/Zip:
APPLICANT INFORMATION	
Applicant Name:	Phone:
Applicant Address:	City/State/Zip:
Property Owner Consent/Agent Authorization: By my signature, I hereby affirm that I am the property owner of record, or if the applicant is an organization or business entity, that authorization has been granted to represent the owner, organization or business in this application. I certify that the preceding information is complete and accurate, and it is understood that I agree to the application being requested for this property. Additionally, my signature below indicates my awareness of the fee required at the time of the application submittal and any additional fees as noted in the City's fee schedule. This fee is non-refundable even in the event of application withdrawal. I have the power to authorize and hereby grant permission for City of Eden officials to enter the property on official business as part of the application process.	
Signature of Applicant:	Date:
INSPECTION	
Inspected by:	Date of Inspection: