



CITY OF HIDALGO
PLANNING & ZONING DEPARTMENT
704 EAST TEXANO DRIVE
HIDALGO, TEXAS 78557
(956) 843-2286 FAX (956) 843-2317
CHANGE OF ZONE APPLICATION

Name of Applicant: _____

Address: _____ Phone: _____

Owner: _____ Phone: _____

Address: _____ Phone: _____

LEGAL DESCRIPTION: _____

PRESENT PROPERTY ZONE: _____

PROPOSED ZONE CHANGE: _____

INTENDED PURPOSE: _____

COMMENTS: _____

As agent, appointed by the owner, I am authorized to act on his/her behalf in regards to the Zoning Commission in reference to the above.

 Agent's Signature

 Date

As owner of the above described property, I hereby request a hearing before the Planning & Zoning Commission in reference to the above.

FOR OFFICE USE ONLY

Fee \$150.00 Check: # _____ Cash: _____ Date: _____
 A/C#01-00-50-4138

