



Consent Form

Project Name: _____

Submittal Date: _____

Application Type (check all that apply)

- | | | |
|---|--|---|
| <input type="checkbox"/> Rezoning | <input type="checkbox"/> Planned Development | <input type="checkbox"/> Special Use Permit (SUP) |
| <input type="checkbox"/> Temporary Seasonal Sales | <input type="checkbox"/> Temporary Retail Sales | <input type="checkbox"/> Temporary SUP |
| <input type="checkbox"/> Variance | <input type="checkbox"/> Tree Survey / Preservation Plan | <input type="checkbox"/> Preliminary Plat |
| <input type="checkbox"/> Final Plat | <input type="checkbox"/> Replat | <input type="checkbox"/> Amending Plat |
| <input type="checkbox"/> Minor Plat | <input type="checkbox"/> Conveyance Plat | |

I hereby give CONSENT to _____ (type, stamp or print clearly full name of agent/representative) to act on my behalf, to submit or have submitted this application and all required material and documents, and to attend and represent me at all meetings and public hearings pertaining to the application(s) indicated above. Furthermore, I hereby give consent to the party designated above to agree to all terms and conditions which may arise as part of the approval of this application.

I hereby certify I have full knowledge the property I have an ownership interest in is the subject of this application. I further certify the statements or information made in any paper or plans submitted herewith are true and correct to the best of my knowledge. I understand this application, related material and all attachments become official records of the City of Sachse, Texas, and will not be returned. I understand that any false, inaccurate or incomplete information provided by me or my agent/representative will result in the denial, revocation or administrative withdrawal of this application, request, approval or permit. I acknowledge that additional information may be required to process this application. I further agree to all terms and conditions, which may be imposed as part of the approval of this application.

Current Property Owner Information

Name: _____

Signature: _____

Address: _____

City, State, ZIP: _____

Agent/Representative Information

Name: _____

Address: _____

City, State, ZIP: _____

NOTARY PUBLIC INFORMATION

THE STATE OF TEXAS

COUNTY OF _____

The foregoing instrument was acknowledged before me this ____ day of _____, 20__ by _____ (name of person acknowledging). He/she is personally known to me or has produced (type of identification) _____ as identification and did/did not take an oath (circle correct response).

(Name - type, stamp or print clearly)

(Signature)

NOTARY'S SEAL OR STAMP

Date: _____	For Administrative Use Only	Case Number: _____
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