

**CONDITIONAL USE APPLICATION
TEA PLANNING & ZONING COMMISSION
BOARD OF ADJUSTMENT**

Name of Applicant:

Address:

_____ Zip Code _____

Phone: _____ Date: _____ Fee: (\$200.00) Paid: yes __ no __

Present Zoning: _____ Site Plan Included: yes _____ no _____

Signature of Present Owner of Record: _____

Legal Description of
Property: _____

Description of Conditional
Use: _____

Inspection Dept.
Comments: _____

Planning & Zoning Administrator Comments:

Planning & Zoning Meeting: _____ Time: _____

Publish Date: _____

Posting Date: _____

Action Taken: _____

Board of Adjustment Meeting: _____ Time: _____

Publish Date: _____

Posting Date: _____

Action Taken: _____