

CITY OF CENTER POINT

Department of Zoning

**STATEMENT OF CONDITIONAL USE**

Address of Property: \_\_\_\_\_

I, \_\_\_\_\_ **(Property Owner/Authorized Agent)** UNDERSTAND this conditional use permit request must be filed and comply with all requirements of The City of Center Point Zoning Ordinance and all other information requested or required by City Departments in order to be complete.

I UNDERSTAND that this application will not be filed until all required information has been received and furthermore that the city reserves the right to postpone this request until such time as the requirements are met. Any violation of city codes or ordinances may result in revocation of the permit, fines and/or penalties according to law.

I UNDERSTAND that if the request is approved the approval only applies to the property(s) shown and listed in the application and/or site plan. I understand that if a conditional use permit is granted, all requirements by the City of Center Point concerning building permits, business license or any other ordinances must be met.

I UNDERSTAND that the conditional use of the property listed above will be: \_\_\_\_\_, if approved by the Zoning Department and/or Board of Zoning Adjustments.

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**

**CERTIFICATION**

I, \_\_\_\_\_, hereby certify that this application, site plan and all other information is made with my approval, as property owner or authorized agent designated by the property owner, as evidenced by signature below. The undersigned below hereby swears to be the authorized applicant designated by the property owner(s) as representative or agent for the property owner(s) to make such application and submit documents on this request. I certify that I have read and understand the contents of this application and that it is in compliance with the City of Center Point Zoning Ordinance.

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**