



CITY OF SAN BENITO  
PLANNING DEPARTMENT

400 N. Travis Street  
San Benito, TX 78586

**APPLICATION FOR  
SUBDIVISION PLAT REVIEW**

(956) 361-3800 (ph.)  
(956) 361-3810 (fax)

**PROPERTY INFORMATION** (Please PRINT or TYPE)

Subdivision Name \_\_\_\_\_

Location \_\_\_\_\_

Number of lots \_\_\_\_\_ Gross acres \_\_\_\_\_ Net acres \_\_\_\_\_

Existing Zoning \_\_\_\_\_ Proposed \_\_\_\_\_ Rezoning Application Yes  No

Existing Land Use \_\_\_\_\_ Proposed Land Use \_\_\_\_\_

ETJ Yes  No  Water Provision \_\_\_\_\_ Wastewater Provision \_\_\_\_\_

Legal Description \_\_\_\_\_

Note: Any variances requested must be submitted in writing by separate instrument.

**OWNER/DEVELOPER INFORMATION** (Please PRINT or TYPE)

Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

E-mail \_\_\_\_\_

Note: If developer is not owner, submit this application with attached notarized authorization letter.

**ENGINEER/SURVEYOR INFORMATION** (Please PRINT or TYPE)

Name \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

E-mail \_\_\_\_\_

Note: Any revisions would require resubmission of blue-line copies and one reduced 11" X 17" copy.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Print Name \_\_\_\_\_ Title \_\_\_\_\_

Owner

Authorized Agent