

Specific Use Permit

City of Euless
201 N. Ector Drive
Euless, Texas
817-685-1684

PART 1. APPLICANT INFORMATION

BUSINESS OWNER (Legal Entity): CS Euless Hospitality, LLC dba Plaza Suites

Official Address to send all City correspondence: 421 Airport Freeway Suite _____

City: Euless State: TX Zip: 76040

Applicant/Agent Name: Leslie Garza Suite: _____

Mailing Address: same above City: _____ State: _____ Zip: _____

Telephone (817) 836-4040 Fax (817) 858-9385 Email: leslie@moehospitality.com

PROPERTY OWNER (Please print): Manpreet Singh

Signature: Manpreet Singh

Mailing Address: same as above Suite: _____

City: _____ State: _____ Zip: _____

Telephone (972) 415-7897 Fax () _____ Email: manny@moehospitality.com

PART 2. PURPOSE OF PROPOSAL

In what ways have conditions changed substantially since the current zoning was set for this property?
name change for higher revenue

How would the proposed amendment promote the public welfare and encourage orderly city development?
more tax for city

PART 3. PROPERTY DESCRIPTION

Street Address of Property (if available): 421 Airport Freeway Euless TX 76040

LEGAL DESCRIPTION: Subdivision Name _____ Block(s) _____ Lot(s) _____
Survey Name(s): _____ Abstract No(s): _____ Tract(s): _____

PART 4. PRESENT USE OF PROPERTY (CIRCLE ONE)

VACANT LAND VACANT BUILDING SINGLE FAMILY DWELLING COMMERCIAL
MULTI-FAMILY DWELLINGS INDUSTRIAL OTHER: housing hotel

PART 5. ACKNOWLEDGMENTS

I certify that the above information is correct and complete to the best of my knowledge and ability and that I will be fully prepared to present the above proposal at a Planning and Zoning Commission public hearing. I reserve the right to withdraw this proposal at any time by filing a written request with the Department of Planning and Development. I understand that 50% of my application fee will be refunded if my written request for withdrawal is received by the Department within 24 hours after the Planning and Zoning Commission public hearing.

Applicant, Owner or Authorized Agent Leslie D. Dange Date 2-20-15

OFFICE USE ONLY:

Case Number: E-03-SUP Zoning Fee: \$125⁰⁰ Date Submitted: 2/20/2015

Accepted By: [Signature] Current Zoning: C-2 Expiration Date: _____

The Development Services Group WILL NOT REVIEW any drawings that are missing any applicable check list items. Please mark all that apply and submit signed list with the application. Application will not be accepted unless this list is submitted.

