

DEVELOPMENT APPLICATION

City of League City Universal Development Application

Incomplete applications will not be accepted.

Indicate "NA" when an item does not pertain to your application.

PROJECT INFORMATION

Project Address: _____
Legal Description: _____
Parcel #(s): _____ Property Platted: YES NO
Current Zoning: _____ Total Acreage: _____ Total Lots: _____
Project Description: _____

APPLICANT & OWNER INFORMATION

Applicant Name: _____ Phone: _____
Company Name: _____ Fax #: _____
Mailing Address: _____ Email: _____

Owner Name: _____ Phone: _____
Company Name: _____ Fax #: _____
Mailing Address: _____ Email: _____

TREE REMOVAL CONTRACTOR INFORMATION (COMPANY CONDUCTING TREE REMOVAL)

Name: _____ Phone: _____
Company (If applicable): _____ Fax #: _____
Mailing Address: _____ Email: _____
City: _____
State: _____ Phone: _____

DISCLAIMER & SIGNATURE

I CERTIFY THAT I AM THE OWNER OR OWNER'S REPRESENTATIVE OF THE PROPERTY (WITH SIGNED LETTER OF AUTHORIZATION) AND THAT THE FOREGOING STATEMENTS AND ANSWERS HEREIN MADE AND ALL DATA, INFORMATION AND EVIDENCE HERewith SUBMITTED ARE IN ALL RESPECTS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE AND CORRECT. FURTHERMORE, I HEREBY IRREVOCABLY AUTHORIZE THE CITY OF LEAGUE CITY, ACTING THROUGH ITS EMPLOYEES, AGENTS, AND REPRESENTATIVES, TO ENTER UPON THE SUBJECT PREMISES AND INTO ANY STRUCTURES THEREON, FOR THE PURPOSES OF INSPECTING AND EVALUATING COMPLIANCE WITH ANY PERMIT ISSUED AS A RESULT OF THIS APPLICATION.

Applicant Signature: _____ Date: _____



Planning Department
 City of League City
 500 W. Walker St.
 League City, TX 77573
 Phone: 281.554.1080
 Fax: 281.554.1020
planning@leaguecity.com

**City of League City
 Universal Development Application**

LETTER OF AUTHORIZATION

Have property owner complete and sign, if applicant differs from property owner.

 Owner Name

 Owner Address

 City, ST Zip

 Date

Planning Department
 City of League City
 500 W Walker Street
 League City, TX 77573

Dear City of League City Planning Department:

I, _____, certify that I am the owner of the project property located at _____ and that the forgoing statements and answers herein made and all data, information and evidence herewith submitted are in all respects to the best of my knowledge and belief, true and correct. I appoint _____ with the company _____ to act as my representative for this project. I agree to be responsible for payment of all bills due to the City of League City related to this application. Furthermore, I authorize employees, agents and representatives of the City of League City to enter and inspect the subject premises, including land and structures, to evaluate existing and proposed conditions as they relate to the submitted application. I understand that any material misrepresentation of this application, failure to comply with ordinances, and/or failure to remit payment for services can lead to delays in this project – up to and including rejecting the project and forfeiting any fees paid.

Please contact me directly at _____ if you have any questions.

Sincerely,

Owner Name _____

Owner Signature _____

TREE DISPOSITION PERMIT APPLICATION

Project Name: _____

This checklist is provided to assist you in addressing the minimum requirements for a Tree Disposition Permit submission. An application is incomplete unless all applicable information noted below is submitted to the Planning Department. Indicate that all information is included on the submitted plans by checking the box next to the required information. **Checking the box certifies to the City that you have completely and accurately addressed the issue.** If not applicable, indicate an "N/A" next to the box. Return this completed form at the time of application submittal.

Types and Description, Select all that apply:

- Single-Family residence – New Construction**
A removal of a tree from an undeveloped property to construct a single-family residence

- Unhealthy / Structurally Unstable Tree**
A removal of a tree from a developed property due to the deteriorating health of the tree and/or the tree is causing structural damage to a nearby building/structure
(Unhealthy/Unstable tree(s) do not require replacement.)

- Commercial Project – New Construction**
A removal of a tree from an undeveloped property to construct a commercial building

- Commercial Project – Addition**
A removal of a tree from a developed commercial property due to an expansion of the existing commercial project

- Other (Describe below):**

ATTACHMENT A – TREE DISPOSITION PERMIT	
Included	Item Description
<input type="checkbox"/>	A copy of the deed and a title report
<input type="checkbox"/>	PDF format on disc containing all documents rotated and formatted in sequential order based upon cover page
<input type="checkbox"/>	Supporting details describing the reason the tree(s) is/are being removed, including a mitigation plan if needed.
<input type="checkbox"/>	For removal of unhealthy or damaged tree(s) – Submit survey of property showing general location of tree(s) to be removed. Tree mitigation may still be required for commercial and multi-family property.
<input type="checkbox"/>	For removal of tree(s) for reasons other than damage – Submit Tree Deposition Plan for mitigation

Fees	
Application Fee for Administrative Approval: \$50	<input type="checkbox"/>

Protected Tree List

List the Protected Trees below. If there are more than 15 trees, provide a separate sheet attached to the application.

Tree No.	Protected Tree Size (In Caliper Inches)	Protected Tree Species	“R” Removed “P” Preserved
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
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_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Total Caliper Inches: _____
Total Caliper Inches Preserved: _____
Total Caliper Inches Removed: _____

I hereby certify that this application, as well as the Tree Disposition Survey, and all related documents are a true representation of all facts concerning the proposed tree removal activity. This application is made with the approval of the Owner and/or a Representative, as evidenced by the signatures below.

Applicant's Signature: _____ Date: _____
Owner(s)' Signature(s): _____ Date: _____
City Arborist Signature: _____ Date: _____