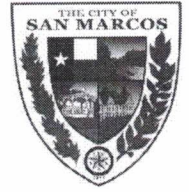


# ANNEXATION APPLICATION

Updated: October, 2019



## CONTACT INFORMATION

Applicant's Name	Doug Goss	Property Owner	LCSM Ph 1-2, LLC
Company	Natural Devleopment	Company	LCSM Ph 1-2 LLC
Applicant's Mailing Address	11612 FM 2244,	Owner's Mailing Address	303 Colorado, Ste
Applicant's Phone #	512-402-1790	Owner's Phone #	512-457-8000
Applicant's Email	dougg@nd-austin.com	Owner's Email	ericw@nd-austin.com

## PROPERTY INFORMATION

Is the property adjacent to city limits ☐ YES ☐ NO

Is the property less than ½ mile in width ☐ YES ☒ NO

Are there less than 3 qualified voters living on the property ☐ YES ☒ NO

Proposed Use: single family Proposed Zoning: SF 4.5

Reason for Annexation / Other Considerations: Development agreement allows City  
annexation upon final platting

## AUTHORIZATION

*I certify that the information on this application is complete and accurate. I understand the fees and the process for this application. I understand my responsibility, as the applicant, to be present at meetings regarding this request.*

Filing Fee \$1,181

Technology Fee \$13

TOTAL COST \$1,194

Submittal of this digital Application shall constitute as acknowledgement and authorization to process this request.

**APPLY ONLINE – [WWW.MYGOVERNMENTONLINE.ORG/](http://WWW.MYGOVERNMENTONLINE.ORG/)**

PROPERTY OWNER AUTHORIZATION

I, Bryan Lee, Manager (owner name) on behalf of  
LCSM Ph 1-2, LLC (company, if applicable) acknowledge that I/we  
am/are the rightful owner of the property located at  
W. CenterPoint Road at Copper Sage (address).

I hereby authorize Doug Goss (agent name) on behalf of  
Natural Development (agent company) to file this application for  
Annexation (application type), and, if necessary, to work with  
the Responsible Official / Department on my behalf throughout the process.

Signature of Owner:  Date: 12-5-19

Printed Name, Title: Bryan Lee, Manager

Signature of Agent:  Date: 11/5/2019

Printed Name, Title: Doug Goss, Project Manager

Form Updated October, 2019





## CHECKLIST FOR ANNEXATION APPLICATION

The following items are requested for consideration of this application. These and additional items may be required at the request of the Department	Comments
<input type="checkbox"/> Pre-development meeting with staff is recommended <ul style="list-style-type: none"> <li>• Please visit <a href="http://sanmarcostx.gov/1123/Pre-Development-Meetings">http://sanmarcostx.gov/1123/Pre-Development-Meetings</a> to schedule</li> </ul>	
<input type="checkbox"/> Completed Application for Annexation	
<input type="checkbox"/> Metes & Bounds description of the area to be annexed	
<input type="checkbox"/> CAD file in grid for GIS integration. Projection: NAD 1983 StatePlane Texas South Central FIPS 4204 Feet	
<input type="checkbox"/> Authorization to represent the property owner, if the applicant is not the owner	
<input type="checkbox"/> Written request to waive the timing requirements for processing annexation under Chapter 43 of the Texas Local Government Code, if the applicant wishes for concurrent consideration of a Zoning Change	
<input type="checkbox"/> <div> <div>Application Filing Fee    \$1,181</div> <div>Technology Fee                \$13</div> </div>	
<b>**San Marcos Development Code Section 2.3.1.1(C): "Every application accepted by the responsible official for filing shall be subject to a determination of completeness...the responsible official is not required to review an application unless it is complete..."</b>	