

Planning & Development Services Department550 Landa StreetNew Braunfels, Texas 78130(830) 221-4050www.nbtexas.org



Plat Waiver Application

Each waiver requested must be submitted on separate application

General:

1	Associated Plat or Master Plan Name	GATEHOUSE SUBDIVISION (Hunter Rd)			
2	Nearest Street Intersection or Address	Approx. 0.3 miles northeast of Hunter Rd. and Conrads Ln. intersection			
3	Waiver Type				
4	Description of Waiver Type	Plat ✓ Sidewalk Traffic Impact Analysis - Level of Service			
5	Code Section to be Waived	Sec. 118-46 - Streets			

Application Fee Schedule:

6	Plat Waiver: \$154.00	
	Sidewalk Waiver: \$309.00	

Required Attachments:

City	Applicant	File ID #	Attachment
			NAME DOCUMENT FILES AS THE ARE LISTED IN BOLD BELOW
	~	1	USB drive with a digital copy(.pdf) of all documents included in application if submitting in person.
	~	2	Application (completed and signed by owner)
1	~	3	Written Justification (in compliance with NBCO Sec. 118-11)
1	~	4	Schematic of Plat Layout
1	~	5	Location Map

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Property Owner Authorization:

As the property owner of the Proposed Subdivision, I hereby authorize City of New Braunfels' staff to visit and inspect the subject property for which this application is being submitted.

Additionally, I have reviewed the Subdivision Application Instructions, the requirements of this application and related checklist(s), and hereby confirm all required materials demonstrating compliance with city codes and regulations are attached.

I will represent my appl	ication before City Staff and/or Planning Commission as the App	licant	
	OR		
I hereby authorize the p	person named under Authorized Agent to act as the Applicant re	presenting this	application
Owners Signature	9 -	Date	8-6-71
Owners Name (printed)	Southstar at Mayfair, LLC Attn: Thad Rutherford	Phone #	
Mailing Address (City, State, Zip)	Obtainstar at Maylair, LLC Attn: Thad Rutherford Phone # (512)-923-9160 1110 Vintage Way, New Braunfels, TX 78132		
E-Mail Address	thad@southstarcommunities.com		

Authorized Agent Statement:

<u>Please Note:</u> The signature of the A requirements of this application and compliance with city codes and regu	uthorized Agent confirms the Authorized Agent has related checklist(s) and hereby confirms all required lations:	reviewed the Plat Application materials are attached den	on Instructions, nonstrating	
Authorized Agent Signature	ALT RO	Date	option to a l	
Agents Name (printed)	Joe F. Nix	Dale	00/04/104	
Company	CEC	Phone #	210 641 0000	
Mailing Address (City, State, Zip)	Phone # 210-641-9999 11550 IH 10WEST, SUITE 395, SAN ANTONIO, TX 78230			
E-Mail	jnix@cectexas.com			

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