



CITY OF LAGO VISTA
5803 THUNDERBIRD
PO BOX 4727
LAGO VISTA, TX. 78645

DEVELOPMENT SERVICES
512-267-5259
development@lagovistatexas.gov

SITE DEVELOPMENT PLAN REVIEW APPLICATION
(Please Print)

Applicant (owner/developer) _____

Mailing address _____
Number & Street _____ City _____ State _____ Zip code _____

Phone (_____) (_____) _____
Day time _____ Cell _____ E-Mail _____

Complete Legal Description of the Property

Travis County Tax Parcel ID # _____

Property Address _____
Number & Street _____ City _____ State _____ Zip code _____

Legal Description _____

Name of Proposed Development _____

Proposed Use _____

ENGINEER (Company Name) _____

Contact person _____

Phone (_____) (_____) _____
Day time _____ Cell _____ E-Mail _____

Engineer's address: _____
Number & Street _____ City _____ State _____ Zip code _____

SURVEYOR (Company Name) _____

Contact person _____

Phone (_____) (_____) _____
Day time _____ Cell _____ E-Mail _____

Surveyor's address _____
Number & Street _____ City _____ State _____ Zip code _____

Note: These items must be submitted with this application:

(other items may be required per the Site Development Ordinance)

- Five sets of the Site Development Plans.
- Payment of all applicable fees (check with the City of Lago Vista).

Signature of Applicant: _____ Date: _____