

Application for Public/Private Agreement Program for Transit-Oriented Development

PROPERTY OWNER INFORMATION											
Nan	ne								Date		
Mai Add	ling Iress							Suite #			
City	City				State	State ZIP					
Phone					E-mail	E-mail Address					
Fax											
PROJECT REPRESENTATIVE CONTACT											
Project Representative Name											
Project Representative Firm											
Mailing Address				2				Suite #	uite #		
City	,				State			ZIP			
Pho	one				E-mail	E-mail Address					
Fax											
PROJECT INFORMATION											
Project Name											
Project Address											
City	,				State			ZIP			
Proj	ject within	Carrollton TIRZ #	1?	YES 🗆	NO 🗆						
Property Plat Attached? (If no, attach Metes and Bounds)			s)	YES	NO 🗌	Trai	nsit Center Name				
Squ	are Footag	ge			Projected Date of Occupancy						
Construction Value of Improvements or Buildings											
Estimated Cost of Infrastructure Improvements											
(Attach detailed line item cost estimate)											
Lan	d Purchase	e Price									
REQUIRED ATTACHMENTS											
Che	neck all those attached: Remit appl request to:					ication, required attachments and other documentation supporting					
	Detailed	Project Descriptio		City of Carrollton							
	Project P	lat or Legal Descr	1949 E Jacksoff Road								
	☐ Project Renderings			PO Box 110535 Carrollton, TX 75011-0535							
	Project D	Drawings Questions regarding the application or program, contact: TOD Manager,							D Managor		
	Project B	Sudget and Schedule 972-466-3042								י אומוומטיני, mailayer,	