

NONCONFORMING USE PERMIT APPLICATION

FRANKLIN COUNTY WATER DISTRICT

P. O. Box 559 Mount Vernon, Texas 75457 • 112 N. Houston St., Mount Vernon, Texas 75457
Voice: 903-537-4536 • Fax: 903-537-4538

NUMBER: _____ () Paid

Date of Application: _____ Telephone Number: _____

Name of Applicant: _____

Mailing Address: _____

APPLICANT'S PROPERTY DESCRIPTION

Development: _____

Lot: _____ Block: _____ Section: _____

Description of specific nonconformity being permitted:

List supporting documentation attached to application:

The undersigned Applicant hereby requests a Nonconforming Use Permit from the Franklin County Water District for the above described nonconformity on certain property owned or controlled by the District. In consideration for the granting of such permit by District, Applicant agrees as follows:

1. Applicant shall abide by all Rules and Regulations of the District, including without limitation the provisions of Article XVI governing Nonconforming Use Permits.
2. Applicant shall immediately notify the District upon the alteration, discontinuance, abandonment, or destruction of the nonconformity specified above.
3. **APPLICANT SHALL INDEMNIFY AND HOLD THE DISTRICT HARMLESS FROM AND AGAINST ANY AND ALL CLAIMS, DAMAGES, SUITS OR CAUSES OF ACTION ARISING AFTER THE EFFECTIVE DATE HEREOF, INCLUDING ALL COSTS OF DEFENSE AND ATTORNEY'S FEES INCURRED BY THE DISTRICT IN CONNECTION THEREWITH, AND ANY ORDERS, DECREES OR JUDGMENTS WHICH MAY BE ENTERED THEREIN, BROUGHT AS A RESULT OF ALLEGED BREACHES OF CONTRACT OR ALLEGED**

TORTUOUS CONDUCT OR AS A RESULT OF ALLEGED DAMAGES RESULTING FROM AN INJURY TO PERSON OR PROPERTY (INCLUDING DISTRICT PROPERTY) IN CONNECTION WITH THE NONCONFORMITY COVERED BY THE NONCONFORMING USE PERMIT.

- 4. Upon the failure of Applicant to comply with any of the terms of this Nonconforming Use Permit, the District will give Applicant written notice of such failure. If such failure is not cured within ten (10) days after receiving such notice (except in the case of an emergency threatening imminent peril to life or property, in which case the District shall not be required to wait ten [10] days), this permit shall be subject to cancellation and Applicant shall be in default under the terms of its lease with the District.

IN WITNESS WHEREOF, Applicant has executed and agrees to abide by the terms of this Nonconforming Use Permit Application, which terms shall automatically be incorporated into and become a part of any permit issued by the District.

APPLICANT: _____

STATE OF _____ §

§

COUNTY OF _____ §

The foregoing instrument was acknowledged before me, a Notary Public in and for the State of _____, on _____, 20____, by _____.

Notary Public, State of _____

Printed Name

+++++

FCWD STAFF USE ONLY

_____ Approved

_____ Denied

Date: _____

Signed: _____