

**VARIANCE TO THE UNIFIED DEVELOPMENT CODE (UDC)**  
**APPLICATION**

**SECTION 1. APPLICANT/OWNER INFORMATION**  
**Please Print or Type**

Applicant/Developer: Office Equity Solutions  
Street Address: 365 Miron Drive, Suite A  
City: Southlake State: TX Zip: 76092  
Telephone: 817.416.3981 Fax: 817.416.8372 E-mail: [REDACTED]  
Applicant's Status: (Check One) Owner  Tenant  Prospective Buyer

**Property Owner must sign the application or submit a notarized letter of authorization.**

Owner: Bank of the Ozarks  
Street Address: 18000 Cantrell RD  
City: Little Rock State: AR Zip: 72223  
Telephone: 501.978.2288 Fax: \_\_\_\_\_ E-mail: \_\_\_\_\_

Signature of Applicant: [Signature] Date: 4-29-24  
Signature of Owner: [Signature] Date: 5/1/2024  
Printed Name of Owner: Amiee Peters Bank OZK

**SECTION 2. VARIANCE REQUEST(S) INFORMATION**

Address or Legal Description: ALLIED KELLER BANK ADDITION  
Lot(s): 1R-3 Block(s): 1 Subdivision Name: \_\_\_\_\_

Justification for Requested Variance(s): We are requesting a variance on Section 8.16 - R - Retail 4.a.2)

Minimum Lot Width - One hundred fifty feet (150').

We are proposing a 123.46' lot width, due to original parcel owners desire to retain ownership of the shared drive.

We are meeting all other requirements.

**A detailed letter of justification and/or exhibits shall accompany this application.**  
**One or more variances can be requested with this application.**

**ARTICLE NINE**  
**Unified Development Code**

Adopted: July 7, 2015



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**APPLICATION**

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Applicant/Developer: Office Equity Solutions

Street Address: 365 Miron Drive, Suite A

City: Southlake State: TX Zip: 76092

Telephone: 817.416.3981 Fax: 817.416.8372 E-mail: [REDACTED]

Applicant's Status: (Check One) Owner  Tenant  Prospective Buyer

***Property Owner must sign the application or submit a notarized letter of authorization.***

Owner: TOC Keller LLC

Street Address: 1020 Macon St

City: Fort Worth State: TX Zip: 76102

Telephone: 817.416.3981 Fax: \_\_\_\_\_ E-mail: \_\_\_\_\_

Signature of Applicant: [Handwritten Signature]  
Date: 4-29-24

Authentisign  
Signature of Owner: Dean Papaliodis  
Printed Name of Owner: Dean Papaliodis  
Date: 04/30/24

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