## Section 3: Applicant Certificate

I affirm that my statements contained in the complet my knowledge and belief.	e application are true a	nd correct to the best of
Applicant Signature:		Date: 3/14/2018
Applicant Name (typed or printed): Philip Cameron		
Applicant Mailing Address: 2445 Westlake Dr.		
City: Austin	State: TX	Zip: 78746
Phone (will be public information):		
Email (optional – will be public information):		

#### Section 4: Owner Certificate

I affirm that my statements contained in the complete application are true and correct to the best of my knowledge and belief.

Owner Signature:	Date: 3/14/18		
Owner Name (typed or printed): Philip Cameron			
Owner Mailing Address: 2445 Westlake Dr.			
City: Austin	State: TX	Zip: 78746	
Phone (will be public information):			
Email (optional – will be public information):			

### **Section 5: Agent Information**

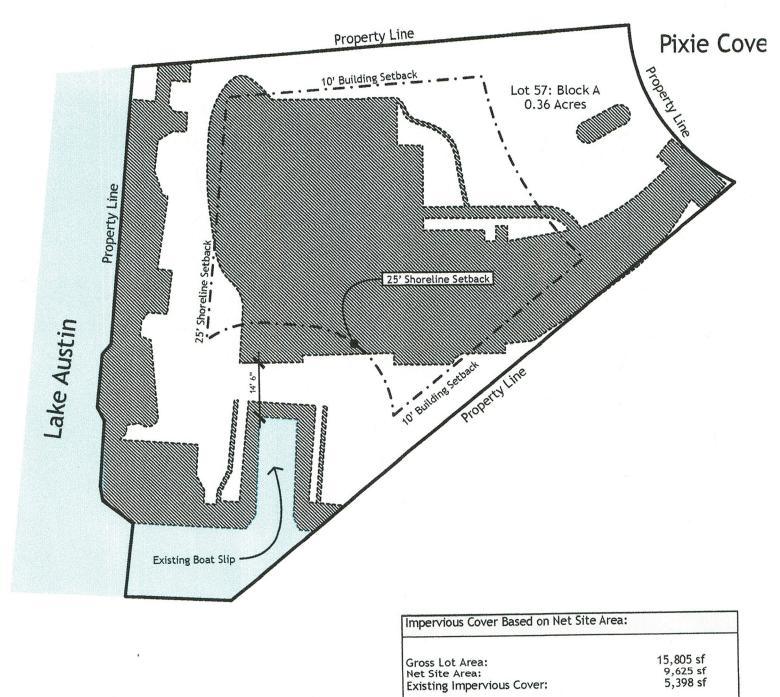
Agent Name: David Cancialosi, Permit Partners			
Agent Mailing Address: 105 W Riverside. Dr. #225			
City: Austin	State: TX	Zip:	78704
Phone (will be public information): (512) 593-5361	· 1		
Email (optional – will be public information):			

## Section 6: Additional Space (if applicable)

Please use the space below to provide additional information as needed. To ensure the information is referenced to the proper item, include the Section and Field names as well (continued on next page).

02/12

# 002/13



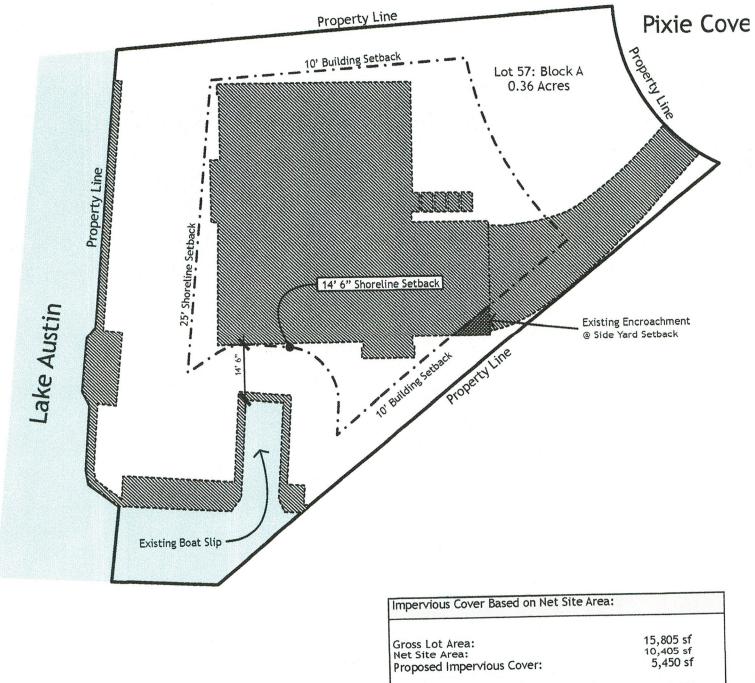
Existing Impervious	Cover Percentage:	56.0%

6705 Pixie Cove, Austin TX Existing Conditions



WINN WITTMAN ARCHITECTURE

## -O02/14

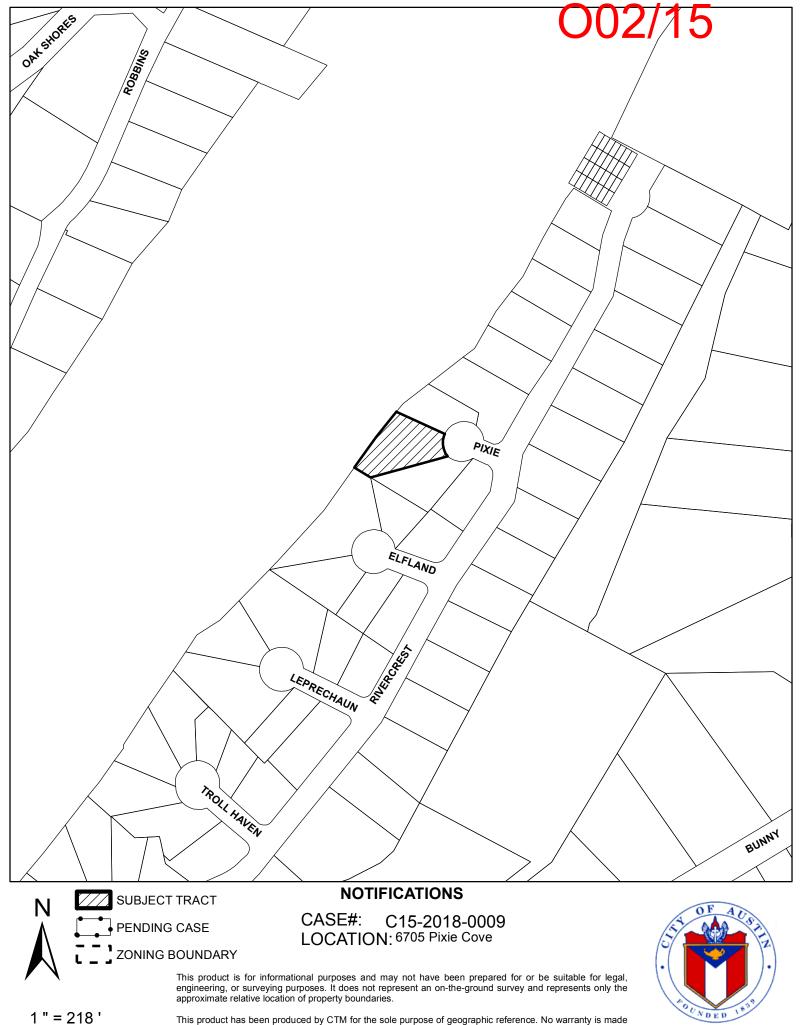


Proposed Impervious Cover Percentage: 52.5%

6705 Pixie Cove, Austin TX Proposed Modifications



WINN WITTMAN ARCHITECTURE



This product has been produced by CTM for the sole purpose of geographic reference. No warranty is made by the City of Austin regarding specific accuracy or completeness.