



**Office of Neighborhood Services**  
**P.O. Box 60**  
**Abilene, TX 79601**

**Phone: 325-676-6230**  
**Fax: 325-676-6242**

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1. Name of Neighborhood Association: \_\_\_\_\_

2. Contact Person: (This information will be used for all correspondence, including notification of zoning cases for registered neighborhood associations that could potentially be affected by the case.)

Name: \_\_\_\_\_ Address: \_\_\_\_\_

Telephone: \_\_\_\_\_ FAX: \_\_\_\_\_

Email: \_\_\_\_\_

**3. Please submit the following:**

- **A map or written description of your association boundaries**
- **A list of your officers, their addresses and telephone numbers**
- **A signed copy of the adopted by-laws**
- **A list of your neighborhood goals**
- **A list of your association s annual community events or activities**

4. Regular Meeting Location: \_\_\_\_\_

5. Regular Meeting Date: \_\_\_\_\_ Time: \_\_\_\_\_

6. Election of Officers (Month): \_\_\_\_\_ Frequency: \_\_\_\_\_

7. Date the Association was Founded: \_\_\_\_\_

8. Membership: (please circle one) Voluntary Mandatory

9. Number of Assoc. Members: \_\_\_\_\_ Number of Housing Units: \_\_\_\_\_

**Please circle your response:**

10. Are any properties in your neighborhood historic? (over 50 years old) YES NO  
(If you are not sure call the Historic Preservation Officer at 676-6230)

11. Would you like information on Historic Overlay Zoning, Historic Districts or Neighborhood Conservation Districts? YES NO

12. Does your neighborhood association publish a newsletter? YES NO

13. Does your neighborhood association have a website? YES NO  
If so, please list address: \_\_\_\_\_