

APPLICATION FOR FINAL PLAT APPROVAL

(To be filed in duplicate)

Date _____

1. Name of Subdivision _____ Major _____

Minor _____

2. Name of Applicant _____ Phone _____

Address _____
(Street No. & Name) (Post Office) (State) (Zip Code)

3. Name of Local Agent _____

Address _____
(Street No. & Name) (Post Office) (State) (Zip Code)

4. Owner of Record _____ Phone _____

Address _____
(Street No. & Name) (Post Office) (State) (Zip Code)

5. Engineer _____ Phone _____

Address _____
(Street No. & Name) (Post Office) (State) (Zip Code)

6. Land Surveyor _____ Phone _____

Address _____
(Street No. & Name) (Post Office) (State) (Zip Code)

7. Attorney _____ Phone _____

Address _____
(Street No. & Name) (Post Office) (State) (Zip Code)

8. Subdivision Location: On the _____ side of _____
(Street)

_____ Feet _____ of _____
(Direction) (Street)

9. Postal Delivery Area _____ School District _____

10. Total Acreage _____ Zone _____ Number of Lots _____

11. Tax Map Designation: Section _____ Lot (s) _____

12. Has the Zoning Board of Appeals (Board of Zoning Adjustment) granted variance, exception, or special permit concerning this property? _____

If so, list Case No. and Name _____

13. Date of sketch plat approval _____

14. Have any changes been made since this plat was last before this Board? _____

If so, describe _____

15. List all land proposed to be subdivided _____

16. Owners of land within 185 feet of Proposed Subdivision _____

17. Attach fifteen (15) copies of proposed preliminary plat.

18. Attach three (3) copies of construction plans.

19. List all contiguous holdings in the same ownership: _____

The applicant hereby consents to the provisions of the subdivision regulations as contained in The City Code of Ordinances providing that the decision of the Planning Commission shall be made within thirty (30) days after the close of the public hearing on final plat approval.

\$150.00 Filing Fee (non-refundable)

Date paid _____

