

Subdivision Owner (s) _____

Contact information: Mailing address: _____

Primary phone: _____

Secondary phone: _____

Email Address: _____

Engineer or Design Architect: _____

Contact information: Mailing address: _____

Primary phone: _____

Secondary phone: _____

Email Address: _____

SUBMITTAL TYPE: ☐ Design Concept ☐ Preliminary Plat ☐ Final Plat
(Check one only)

FEES: Preliminary or Final Plat (Standard fee) \$ 500.00

Final Only

Number of residential lots created _____ X \$1,000.00 = _____

Commercial or industrial acre or acre portion _____ X \$4,000.00 = _____

TOTAL \$ _____

I/we hereby certify that all required information and materials are true and accurate to the best of my/our knowledge:

Owner Signature: _____ Date _____

Owner Signature: _____ Date _____

~~~~~

Date received by the Clerk \_\_\_\_\_

Dates transmitted to:

City Planning Commission \_\_\_\_\_ County Planning Department \_\_\_\_\_

County Planning Department \_\_\_\_\_ City Engineer \_\_\_\_\_

School Board \_\_\_\_\_ Fire District \_\_\_\_\_

Planning Commission meeting/hearing date approval \_\_\_\_\_

City Council Resolution number of approval \_\_\_\_\_

\_\_\_\_\_