



Development Services Department

Preliminary Plat / Master Plan Application

Is this plat in the ETJ? ____ Yes ____ No

Is this plat ____ Commercial ____ Residential

Check One: ____ Preliminary Plat (\$150) ____ Master Plan (\$150)

Property Owners Information

Name: _____

Telephone Number: _____ E-mail Address: _____

Address: _____ City: _____ State: _____ Zip: _____

Applicant Information

Name: _____

Telephone Number: _____ E-mail Address: _____

Address: _____ City: _____ State: _____ Zip: _____

Agent or Engineer Information

Name: _____

Telephone Number: _____ E-mail Address: _____

Address: _____ City: _____ State: _____ Zip: _____

Site Information

Street Address: _____

Existing Legal Description (please include a metes and bounds description if not subdivided): _____

Subdivision: _____ Block: _____ Lot(s): _____

Proposed Legal Description (please include a metes and bounds description if not subdivided): _____

Subdivision: _____ Block: _____ Lot(s): _____

Proposed number of lots to be (re)platted: _____

Existing zoning designation: _____

Minimum Submittal Checklist

- Letter to the Planning and Zoning Commission explaining what is being requested and the reason(s)
- \$150 application fee paid
- Title report within 30 days of submission
- Two (2) paper copies of Plat for review and comments
- One (1) digital copy of Plat for review and comments
- Any other pertinent information/documentation that the applicant feels would substantiate the request

Signature

I hereby certify that the information on this form is **COMPLETE, TRUE, and CORRECT** and the under signed is authorized to make this application concerning the above described property. I understand that submitting this application does not constitute approval and incomplete applications will result in delays and possible denial. I further request that the Planning & Zoning Commission/Board of Adjustment/Plan Review Committee review this matter and take appropriate action.

X

Signature of Applicant Date

X

Signature of Owner Date

FOR EMPLOYEE USE ONLY

RECEIVED BY: _____ DATE: _____

REVIEWED BY: _____ DATE: _____

NOTES:

TOTAL FEE: _____