

APPLICATION FOR PLAT AMENDMENT

Original Subdivision Name: _____ Application Date: _____

Property Address: _____ County Area or City: _____

Developer: _____ Address: _____

Phone No.: (____) _____ Email: _____

**** Property Tax ID No:** _____ **Water Source:** _____
(Not Social Security No)

****Application will NOT be accepted without Property Tax ID no.(s) and Original Plat Map****

Turn in Original Plat Map of the subdivision, showing the following:

- Original Subdivision and Lot Boundaries
- Existing Buildings, Wells, Ditches, Ponds, Roads, etc.
- Owner Name, Address and Phone Number
- Direction of North
- Lot Numbers and Acreage
- Slopes, including contour lines if the slope is significant

Turn in Proposed Plat Amendment:

- Subdivision and Lot Boundaries
- Existing Buildings, Wells, Ditches, Ponds, Roads, etc.
- Owner Name, Address and Phone Number
- Direction of North
- Lot Numbers and Acreage
- Slopes, including contour lines if the slope is significant

Comments: _____

Filed in: _____
File No. _____
Property Tax ID No. _____

For Office Use Only

Amount Paid: _____
Payment Date: _____
Cash <input type="checkbox"/> Check <input type="checkbox"/> Credit/Debit <input type="checkbox"/>
Received By: _____