

SUBDIVISION REPLAT APPLICATION

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I (we) do hereby apply to replat the following described subdivision with the provisions of the Subdivision Control Ordinance of the City of Plymouth, Indiana.

Date Filed _____

Name of Subdivision _____

Date of Preliminary Approval _____ Case No. _____

Date of Final Approval _____ Case No. _____

Plan Commission Action _____

Date Plat Recorded _____

Specific Request (1-2 sentence explanation) _____

Explain Intended Use of Property _____

Property Owner(s) _____

Address _____ Telephone _____

Developer _____

Address _____ Telephone _____

Land Surveyor preparing the Plat _____

Address _____ Telephone _____

Address or location _____

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Section _____ Township _____ Range _____ Area (acres) _____

Number of lots _____ Minimum lot sizes _____

Number of feet of new streets to be dedicated _____

Legal description of property _____

Current zoning of property _____

Signature of Owner

There is a \$10.00 advertising fee at the time of application.

You must furnish the names and mailing addresses of neighboring property owners (within 300' of the owner's property) at the time of application.

We require that you furnish the City of Plymouth with a copy of the amended recorded plat within one month of approval.

You must furnish a plat with the different zoning areas marked on the plat.

Subject to the Subdivision Control Ordinance, Zoning Ordinance and all other ordinances of the City of Plymouth, Indiana.