Minor Plat Application

		Date:	APH	PLICATION # MS-
Applicant's Name:	Phone:		Fax:	
Mailing Address:	1			
Owner's Name:	Phone:		Fax:	
Mailing Address:				
1. Relationship of applicant to property	v: □ Own	er	□ Surveyor	□ Other:
		-	-	
2. Location of property: 3. Zoning District of Property:				
4. Parcel PIN Number(s):				
5. Minor Subdivision Application is for:				
Recombination of Property				
□ Easement Dedication				
Right of Way Dedication				
6. All Plats must contain the following information:				
□ Title Information ○ FIRM map & date □ All easements, reservations, on-site ○ Name ○ Site area □ demolition landfills, & other dedicate ○ Subdivision name ○ Lots being created ○ Type & purpose ○ Owner's name & address ○ Setbacks ○ Size in square feet & acres ○ Plat date ○ Total R/W dedication ○ Party responsible for maintenance □ Vicinity Map □ Sheet index □ Location & requirements of all stream ○ Site & streets labeled w/i ½ mi □ Signature blocks □ cortion & requirements of all stream ○ North arrow □ North arrow & declination □ All hydraulic features within 50' of ar ○ Sale or labeled NTS □ Graphic & numeric scale □ Detailed flood information for plats sl ○ Name □ Lot addresses □ Detailed flood plain ○ Seal □ Lot & block numbers ○ Note "Any construction or use wither sliped to the restrictions inpotentiation or sliped to the restrictio				 demolition landfills, & other dedicated areas Type & purpose Size in square feet & acres Party responsible for maintenance Location & requirements of all stream corridor buffer boundaries All hydraulic features within 50' of any parcel line Detailed flood information for plats showing regulated floodplain Note "Any construction or use within the Special Flood Hazard Area (SFHA) is subject to the restrictions imposed by the Wendell Flood Damage Prevention Ordinance." Minimum finished floor elevation for lots in the SFHA Due upon submittal.
Office Use Only	D 11 1 -			Date Paid:
Staff Review Initials: Preliminary Review Date: Date Comments Sent:				
Date Mylars Submitted: Date of Approval: Date Mylar Recorded:				
Date Mylar Returned:				
Notes:				
Review Officer Approval Signature Date				