



# CITY OF LOWELL APPLICATION & CHECKLIST INFORMAL PLAT



**STAFF USE ONLY**

Date Application Submitted \_\_\_\_\_  
Date Accepted as Complete \_\_\_\_\_

**FEE: \$100.00**

**APPLICATION**

Fill out this form completely, supplying all necessary information and documentation to support your request.

**GENERAL INFORMATION**

Applicant \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

Day Phone: \_\_\_\_\_  
Fax #: \_\_\_\_\_

Representative \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

Day Phone: \_\_\_\_\_  
Fax #: \_\_\_\_\_

Property Owner: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_

Day Phone: \_\_\_\_\_  
Fax #: \_\_\_\_\_

**INDICATE WHERE CORRESPONDENCE SHOULD BE SENT:**

- \_\_\_\_\_ Applicant
- \_\_\_\_\_ Representative
- \_\_\_\_\_ Owner

**DESCRIBE PROPOSED PROJECT IN DETAIL (Attach to application)**

**PROPERTY DESCRIPTION**

Site Address: \_\_\_\_\_  
\_\_\_\_\_

Current Zoning District \_\_\_\_\_

**Attach Legal Description of Property.** (This may be found on deed or current survey of property.)

**FINANCIAL INTERESTS**

The following entities and/or people have financial interest in this project:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**APPLICANT/REPRESENTATIVE:** I certify under penalty of perjury that the foregoing statements and answers herein made, all data, information and evidence herewith submitted are in all respects, to the best of my knowledge and belief, true and correct. I understand that submittal of incomplete, incorrect or false information is grounds for invalidation of the application. I understand that the City may not approve my application or may set conditions on approval.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**PROPERTY OWNER/AUTHORIZED AGENT:** I certify under penalty of perjury that I am the owner of the property that is the subject of this application and that I have read this application and consent to its filing. (If signed by the authorized agent, a letter from the property owner must be provided indicating that the agent is authorized to act on his/her behalf.)

\_\_\_\_\_  
Signature Date

**Staff use only**

*Administrative Approval:*

*Informal Plat* \_\_\_\_\_  
City Engineer Date

**Checklist:\***

- | Yes                      | No                       | N/A                      |  |
|--------------------------|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 1. Completed application form.   |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 2. Payment of application fee: \$100.00  |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 3. Legal description of the property. This information can be a copy of the deed from the abstract or you can ask an abstract company to certify ownership.    |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 4. Proof of county approval if outside City limits.  |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 5. Survey of the property showing the following information:   |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | A. Lot configuration including bearings, distances, and size of each existing lot.   |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | B. Lot configuration including bearings, distances, and size of each proposed lot.   |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | C. Dimension of right-of-way from centerline.  |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | D. All easements - present and proposed.   |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | E. 2 Copies for Lowell Planning Dept. 2 copies for record with County Recorders Office * County will only accept plats that are 18" X 24" for filing purposes. |

**DATA ON DISKETTE**

- |                          |                          |                          |   |
|--------------------------|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 1. Magnetic media or CD with all information in AutoCad or a similar format (DWG or DXF) must be submitted with the final plat. Questions concerning this requirement should be directed to Planning. |
|--------------------------|--------------------------|--------------------------|---|

**MAP & PLAN**

- |                          |                          |                          |   |
|--------------------------|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 1. Applicant shall provide one each of the following, vicinity map and site plan, on an 8.5"x11" sheet. |
|--------------------------|--------------------------|--------------------------|---|

**Applicant shall positively certify each item. Where "no" or "N/A" is checked, Applicant shall submit a written explanation why the item is not positively certified.**