



# LAND STUDY APPLICATION

DATE: \_\_\_\_\_ FILE NO. \_\_\_\_\_

SUBDIVISION NAME: \_\_\_\_\_

1. Legal description for the area included on this plat (Tract, Block, Grant, etc.)  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. Property Land Uses:

	<u>ACRES</u>	<u>SITES</u>		<u>ACRES</u>	<u>SITES</u>
Single-family	_____	_____	Office	_____	_____
Duplex	_____	_____	Street & Alley	_____	_____
Apartment	_____	_____	Ponding & Drainage	_____	_____
Mobile Home	_____	_____	Institutional	_____	_____
P.U.D.	_____	_____	Other (specify below)	_____	_____
Park	_____	_____	_____	_____	_____
School	_____	_____	_____	_____	_____
Commercial	_____	_____	Total No. Sites	_____	_____
Industrial	_____	_____	Total (Gross) Acreage	_____	_____

3. What is existing zoning of the above described property? \_\_\_\_\_ Proposed zoning? \_\_\_\_\_

4. Will the residential sites, as proposed, permit development in full compliance with all zoning requirements of the existing residential zone(s)? Yes \_\_\_\_\_ No \_\_\_\_\_

5. What type of utility easements are proposed: Underground \_\_\_\_\_ Overhead \_\_\_\_\_ Combination of Both \_\_\_\_\_

6. What type of drainage is proposed? (If applicable, list more than one)  
\_\_\_\_\_  
\_\_\_\_\_

7. Are special public improvements proposed in connection with development? Yes \_\_\_\_\_ No \_\_\_\_\_

8. Is a modification or exception of any portion of the Subdivision Ordinance proposed? Yes \_\_\_\_\_ No \_\_\_\_\_  
If answer is "Yes", please explain the nature of the modification or exception \_\_\_\_\_

9. Remarks and/or explanation of special circumstances: \_\_\_\_\_  
\_\_\_\_\_

10. Will the proposed subdivision require the city to review and decide whether this application is subject to the standards in effect prior to the effective date of the current applicable standards? Yes \_\_\_\_\_ No \_\_\_\_\_

11. Owner of record \_\_\_\_\_  
(Name & Address) (Zip) (Phone)
12. Developer \_\_\_\_\_  
(Name & Address) (Zip) (Phone)
13. Engineer \_\_\_\_\_  
(Name & Address) (Zip) (Phone)

OWNER SIGNATURE: \_\_\_\_\_

REPRESENTATIVE SIGNATURE: \_\_\_\_\_

REPRESENTATIVE CONTACT (PHONE): \_\_\_\_\_

REPRESENTATIVE CONTACT (E-MAIL): \_\_\_\_\_

**NOTE: SUBMITTAL OF AN APPLICATION DOES NOT CONSTITUTE ACCEPTANCE FOR PROCESSING UNTIL THE PLANNING DEPARTMENT REVIEWS THE APPLICATION FOR ACCURACY AND COMPLETENESS.**

