APPLICATION FOR SUBDIVISION APPROVAL

Check One:

Sketch Plan ( )

Preliminary Plat ( )

Final Plat ( )

File No. _____

Date of Application _____

WENDOVER CITY PLANNING COMMISSION

Name of Subdivison _____

If a Final Plat, indicate:

Section Number, if any _____

Date of Preliminary Plat Approval _____

Location _____

_____

Owner (s) _____

Address (s) _____

_____ Telephone (s) _____

Applicant _____

Address _____

Telephone _____

Registered Engineer of Surveyor _____

Address _____ Telephone _____

Exsisting Zoning _____

Number of Lots _____ Total Acerage _____
Minimum Lot Size _____
Lineal Feet of New Streets _____
Water System: Public System _____ On Lot _____
Sewage System: Public System _____ On Lot _____

Remarks: _____

_____

_____

(Signature) _____
Owner or Applicant