



**Please check the appropriate box(es) and refer to supplemental forms for submittal requirements. All fees must be paid at the time of application. Please note that these applications are not reviewed in a public meeting.**

SUBDIVISIONS		MISCELLANEOUS APPLICATIONS	
<input type="checkbox"/> Major – Preliminary Plat / Major Amendment (Forms S & S1)		<input type="checkbox"/> Sidewalk Waiver (Form V2)	
<input type="checkbox"/> Major – Bulk Land Plat (Forms S & S1)		<input type="checkbox"/> Waiver to IDO (Form V2)	
<input type="checkbox"/> Extension of Preliminary Plat (Form S1)		<input type="checkbox"/> Waiver to DPM (Form V2)	
<input type="checkbox"/> Minor Amendment - Preliminary Plat (Forms S & S2)		<input type="checkbox"/> Vacation of Public Right-of-way (Form V)	
<input type="checkbox"/> Major - Final Plat (Forms S & S2)		<input type="checkbox"/> Vacation of Public Easement(s) DHO (Form V)	
<input type="checkbox"/> Minor – Preliminary/Final Plat (Forms S & S2)		<input type="checkbox"/> Vacation of Private Easement(s) (Form V)	
APPEAL		<input type="checkbox"/> Extension of Vacation (Form V)	
<input type="checkbox"/> Decision of DHO (Form A)			
BRIEF DESCRIPTION OF REQUEST			
APPLICATION INFORMATION			
Applicant/Owner:		Phone:	
Address:		Email:	
City:	State:	Zip:	
Professional/Agent (if any):		Phone:	
Address:		Email:	
City:	State:	Zip:	
Proprietary Interest in Site:		List <u>all</u> owners:	
SITE INFORMATION (Accuracy of the existing legal description is crucial! Attach a separate sheet if necessary.)			
Lot or Tract No.:		Block:	Unit:
Subdivision/Addition:		MRGCD Map No.:	UPC Code:
Zone Atlas Page(s):	Existing Zoning:		Proposed Zoning
# of Existing Lots:	# of Proposed Lots:	Total Area of Site (Acres):	
LOCATION OF PROPERTY BY STREETS			
Site Address/Street:		Between:	and:
CASE HISTORY (List any current or prior project and case number(s) that may be relevant to your request.)			
I certify that the information I have included here and sent in the required notice was complete, true, and accurate to the extent of my knowledge.			
Signature:		Date:	
Printed Name:		<input type="checkbox"/> Applicant or <input type="checkbox"/> Agent	