

# Major FINAL Plat Subdivision Application

Joint City-County Planning Commission of Nelson County

Please type or print (blue or black ink)

## GENERAL INFORMATION

Plat Type (check one):  Final  Phased Final\*  Amended Final Application Date: \_\_\_\_\_

*\*For phased developments, final plats for phases must be submitted within six (6) months of the previous phase.*

Subdivision/Development Name: \_\_\_\_\_

Subdivision/Development Location: \_\_\_\_\_

Total Acreage to be Subdivided: \_\_\_\_\_ Total Lots to be Created: \_\_\_\_\_

Current Zoning: \_\_\_\_\_

Proposed Use(s): \_\_\_\_\_

Preliminary Plat Approval Date: \_\_\_\_\_

Is this final plat also to be considered as a final PUD development plan? Yes  No  N/A

Have variances from dimensional requirements of the Zoning Ordinance been approved? Yes  No  N/A

*If yes, please list the approved variance(s):* \_\_\_\_\_

Have variances from the Subdivisions Regulations under Section 8.1 been approved? Yes  No  N/A

*If yes, please list the approved variance(s):* \_\_\_\_\_

Have drainage/roadway plans been submitted and approved by the City/County Engineer? Yes  No  N/A

Has a state entrance permit been issued for this development? Yes  No  N/A

## PROPERTY OWNER INFORMATION

Name: \_\_\_\_\_ Daytime Phone #: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email Address: \_\_\_\_\_

## DEVELOPER INFORMATION (if different from Owner)

Name: \_\_\_\_\_ Daytime Phone #: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email Address: \_\_\_\_\_

## CONTACT INFORMATION (if different from Owner & Developer)

Name: \_\_\_\_\_ Daytime Phone #: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email Address: \_\_\_\_\_

**LAND SURVEYOR INFORMATION**

Name: \_\_\_\_\_ Daytime Phone #: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Email Address: \_\_\_\_\_

**ENGINEER INFORMATION (if applicable)**

Name: \_\_\_\_\_ Daytime Phone #: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Email Address: \_\_\_\_\_

**SUBMITTAL CHECKLIST**

The following items are required for final plat submission:

- 1. Major Final Plat Subdivision Application form, completed and signed;
- 2. Ten (10) copies of final plat;
- 3. Copy of state entrance permit, if applicable;
- 4. Copy of city or county roadway and drainage approval, if applicable;
- 5. Written Subdivision Regulations variance (§8.1) request and justification statement, if applicable;
- 6. Written description of Zoning Regulations variances to be requested, if applicable;
- 7. Draft copy of private deed restrictions or protective covenants, if required; and,
- 8. Nonrefundable review and Certificate of Land Use Restriction fees, made payable to the Planning Commission.

**PROPERTY OWNER CERTIFICATION & SIGNATURE**

*I (We) affirm that the submitted plat was prepared at my (our) direction, and I (we) hereby consent to the proposed layout and division. I (We) hereby agree to comply with all applicable Zoning and Subdivision Regulations, pay all applicable fees, and provide any and all requested submittals, documentation, information and copies. I (We) understand that the final plat must be recorded in the Nelson County Clerk's office within sixty (60) days of approval or final plat approval is void. I (We) also understand that for phased developments, final plats for subsequent phases must be submitted within six (6) months of the previous phase. I (We) do hereby certify that the information provided herein is both complete and accurate to the best of my (our) knowledge, and I (we) understand that any inaccuracies may be considered just cause for invalidation of this application and preliminary plat and any action taken on the application and plat.*

\_\_\_\_\_  
Owner

\_\_\_\_\_  
Owner

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

*The foregoing signatures constitute all of the property owners necessary to convey fee title or their legally constituted attorney-in-fact.*

**For Office Use Only**

Date Application Received: \_\_\_\_\_ Received by: \_\_\_\_\_  
 Fee Paid: \$ \_\_\_\_\_  Check # \_\_\_\_\_  Cash  Other (specify): \_\_\_\_\_  
 Zone Change #: \_\_\_\_\_ Variance #: \_\_\_\_\_  
 Planning Commission Meeting Date: \_\_\_\_\_ Agenda #: \_\_\_\_\_  
 Approved  Disapproved  Conditionally Approved §8.1 Variance - Approved  Denied   
 Date Recorded: \_\_\_\_\_ Plat Cabinet / Slot #: \_\_\_\_\_