

City of Moraine Planning Commission

Application for Subdivision

Revised 2/2011

Date Received: _____ Application No.: _____ - _____ Fee: _____
 Preliminary: _____ Final: _____ Replat: _____
 Total Area: _____ New Total Lots: _____ Minor Subdivision?

General

Name of Subdivision: _____
 City Lot Number(s): _____
 Street: _____ Section: _____ Town: _____ Range: _____

Applicant(s) – Please include additional owners or applicants of back of application

Name of Owner: _____
 Address: _____ Phone: _____
 Name of Engineer: _____
 Address: _____ Phone: _____
 Name of Surveyor: _____
 Address: _____ Phone: _____

Subdivision Data

Proposed Use: _____
 Present Zoning Dist.: _____ Proposed Zoning Change: _____
 Deed Restrictions: Yes No (Circle one; if Yes, provide copy of proposed restrictions)
 What type of Sewage do you propose? _____

List all proposed improvements; State your intent to install or post a guarantee prior to installation:

<u>Improvement</u>	<u>Length</u>	<u>Installation</u>	<u>Guarantee</u>
Thoroughfare (LF)	_____	_____	_____
Interior St. (LF)	_____	_____	_____
Sewer (LF)	_____	_____	_____
Water (LF)	_____	_____	_____
Storm (LF)	_____	_____	_____

 Applicant Signature Date