



FINAL PLAT

1. Name of Proprietor _____
 Address _____

2. Name of Surveyor or Engineer _____
 Address _____
 Phone # _____ Fax # _____

3. Name of Subdivision _____

4. Description of Proposed Development _____

5. Proposed Zoning Changes? (If yes, please attach description)
 Yes _____ No _____

6. Proposed Deed Restrictions of Covenants? (If yes, please attach 10 copies)
 Yes _____ No _____

7. Area of Final Plat Subdivision (Zoned) _____
 (Acres) _____ Number of Lots _____

8. List all public improvements intended for installation and their actual or estimated costs, indicated those that have been completely and satisfactorily installed ad/or those for which the proprietor will render a financial guarantee of performance in lieu of installation.

Improvement	Cost	Installed	Guarantee
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

9. List all other data and documentation submitted with this application for Final Plat Approval.

Item	Number of Copies
_____	_____
_____	_____
_____	_____
_____	_____

THIS APPLICATION PROVIDES AUTHORITY FOR TOWNSHIP REPRESENTATIVES TO PHYSICALLY VIEW AND INSPECT THE PROPERTY.

IF COST OF REVIEW EXCEED STATED AMOUNT THE APPLICANT WILL BE BILLED FOR THE ADDITIONAL AMOUNT.

Signature of Proprietor

Date

Signature of Surveyor/Engineer

Date

*****FOR TOWNSHIP USE*****

Date received by Township Board _____

Action by Township Board _____

If applicable, reasons for rejection _____

Date of action by Township Board _____

Township Clerk

Date

Township Supervisor

Date