

Application for Primary Approval of Subdivision Plat

325 S Oak Street, Suite 204, Winchester, IN 47394 765-584-8610

Randolph County APC

Date Received by Plan Commission _____

Application Number: _____

Name of Applicant: _____

Address: _____

Phone: _____

I (we) do hereby apply primary approval of the following described subdivision in accordance with the provisions of the Comprehensive Plan. I (we) am (are) the owner (s) duly authorized agents or trustees for the owner (s) of the real estate included in the said subdivision.

Name of Subdivision: _____

Generally described as follows:

Township _____ Sec. _____ Township _____ Range _____

Dimensions of the Subdivision:

Area (in acres): _____ Half Width: _____

Miles (to hundredths) of new streets to be dedicated to the public:

Full Width: _____ Half Width: _____

Name of the Registered Civil Engineer of Surveyor preparing plat of the Subdivision:

Address: _____ Phone _____

The undersigned, having been duly sworn, upon oath states that the above information is true and correct as he is informed and believes.

Signature of Applicant: _____

Title of Applicant: _____

State of Indiana} SS:

County of _____ }

Subscribed and sworn to before me this _____ day of _____, 20_____.

Notary Public: _____

My Commission Expires: _____