

City of Casper Planning Division

Plat/Subdivision Application

OWNER'S INFORMATION:			
NAME:			
ADDRESS:			
	EMAIL:		
0\	WNER'S AUTHO	ORIZED REPRE	SENTATIVE:
NAME:			
ADDRESS:			
TELEPHONE:		EMAIL:	
APPLYING FOR (check one):	FINAL PLAT	REPLAT	MINOR BOUNDARY ADJUSTMENT
NAME OF SUBDIVISION:			
COMMON ADDRESS OR LOCA	ATIONAL DESCRI	PTION:	
CURRENT LAND USE:			
TOTAL ACREAGE:			
NUMBER OF LOTS:(Minor Boundary Adjustment can not exceed 2 lots)			
SIZE OF LARGEST LOT:		SIZE OF SMALLEST LOT:	
CURRENT ZONING:		PROPOSED ZONING:	
The following owner's signature, or agen knowledge, and that the owner has thore			tion is accurate and correct to the best of the owner's offormation and requirements.
SIGNATURE OF PROPERTY OV	VNER:		
DATE:			

SUBMIT TO:

Community Development Department Planning Division 200 N David, RM 203

Casper, WY 82601 Phone: 307-235-8241

E-mail: ccollins@casperwy.gov

A COMPLETE SUBMITTAL MUST INCLUDE:

- COMPLETED APPLICATION, INCLUDING ORIGINAL SIGNATURES OF PROPERTY OWNERS
- PROOF OF OWNERSHIP
- PDF (11"X17" SCALE) OF THE PLAT (Full-Sized Hard Copies MAY Also be Required)
- ARCGIS-COMPATIBLE SHAPEFILE SHOWING LOTS, BLOCKS, STREETS, ETC.
- \$1,200 (25 LOTS OR FEWER); \$1,800 (26 Lots or more); (\$200 FOR MINOR BOUNDA-RY ADJUSTMENT); (Preliminary Plat \$1,000). APPLICATION FEE (NON-REFUNDABLE)

FOR OFFICE USE ONLY:

DATE SUBMITTED:

REC'D BY: