

SUB-DIVISION TYPE "B" APPLICATION

DATE:	Zoning District _	Permit #		
	APPLICANTS			
Applicant	Phone	E-mail		
Address	City	State	Zip	
Applicant	Phone	E-mail		
Address	City	State	Zip	
	PROPOSED SUB-DIV	ISION		
Address of Property				
Legal Description				
Total Land Area	Acres to be sub-divided i	nto Lots		
	DOCUMENTS AND FEES A			
() Application Fee of \$	() Filing Fee	() Filing Fee of \$		
() Recordable Plat of proposed	sub-division with required inform	nation and measure	ements	
provisions of Ordinance No. 590 Applicant(s) further state that the	e above described tract of land, so and Ordinance 860, to sub-dividence ne sub-division of the tract of land dedication of right-of-ways, or ext	e said tract of land I will not require th	as shown by attached plat e construction or	
Dated This day of	20			
Applicant Signature				
Applicant Signature				
Applicant Signature				
Mount Carmel City Council Acti	on	Date		