

**CITY OF LAKE CHARLES
APPLICATION FOR FINAL SUBDIVISION APPROVAL**

DATE: _____

APPLICATION FEE: \$ _____
PLAT FILING FEE: \$ _____

1. NAME OF SUBDIVISION: _____

2. NAME OF APPLICANT: _____

ADDRESS: _____ ZIP _____ PHONE _____

3. NAME OF AUTHORIZED AGENT: _____

ADDRESS: _____ ZIP _____ PHONE _____

4. OWNER OF RECORD: _____

ADDRESS: _____ ZIP _____ PHONE _____

5. ENGINEER (and/or Land Surveyor): _____

ADDRESS: _____ ZIP _____ PHONE _____

6. ATTORNEY: _____

ADDRESS: _____ ZIP _____ PHONE _____

7. SUBDIVISION LOCATION: _____

8. TOTAL ACREAGE BEING SUBDIVIDED: _____

NO. OF LOTS: _____

9. ZONING CLASSIFICATION: _____

10. HAVE ANY CHANGES BEEN MADE TO PRELIMINARY PLAT SINCE LAST PRESENTED TO THE COMMISSION? IF YES, STATE: _____

11. DATE OF PRELIMINARY PLAT APPROVAL: _____

12. IF APPLYING FOR PRELIMINARY/FINAL SUBDIVISION APPROVAL, LIST ALL ABUTTING AND ADJACENT PROPERTY OWNERS AND ADDRESSES:

13. ATTACH **FIFTEEN (15)** COPIES OF THE FINAL PLAT.

14. ASSURANCES OF COMPLIANCE WITH REGULATIONS AS STATED.

THE APPLICANT HEREBY CONSENTS TO THE PROVISION OF THE SUBDIVISION REGULATIONS PROVIDING THAT THE DECISION OF THE PLANNING COMMISSION SHALL BE MADE WITHIN FORTY (40) DAYS AFTER THE CLOSE OF THE PUBLIC HEARING ON FINAL PLAT APPROVAL.

I, _____ HEREBY DEPOSE AND SAY THAT ALL THE ABOVE STATEMENTS AND THE STATEMENTS CONTAINED IN THE PAPERS SUBMITTED HEREWITH ARE TRUE.

BY: _____
SIGNATURE OF APPLICANT

DATE: _____