Application for SUBDIVISION

Minor ___ or Major ___
(Subdivision Control Ordinance)

This application must be completed and filed with the Logansport/Cass County/Walton Planning Department in accordance with the meeting schedule. (*if same or not applicable leave blank)

APPLICANT INFORMATION  *ALL INFORMATION PROVIDED WILL BECOME PUBLIC RECORD

Applicant’s Name: __________________________________________________________________
Address: __________________________________________________________________________
Telephone Number: ___________________________ Email: _______________________________________

OWNER INFORMATION (if different from applicant information)

*Owner’s Name: __________________________________________________________________
*Address: _________________________________________________________________________
*Telephone Number: __________________________________________________________________

RepresentATIVE INFORMATION (if different from applicant information)

*Representative: __________________________________________________________________
*Address: _________________________________________________________________________
*Telephone Number: ___________________________ Email: _______________________________________

Name of Proposed Subdivision: ________________________________________________________

Number of Parcels & Total Area (square feet or acreage):
_________________________________________________________________________________

Address or common description of property:
_________________________________________________________________________________

Legal description of property affected:
_________________________________________________________________________________

Proposed Use of Subdivision (i.e.: Single or Multi-Family Residential, Commercial or Industrial)
_________________________________________________________________________________

By my signature, I acknowledge the above information and attached exhibits, to my knowledge and belief, are true and correct.

Applicant’s Signature: _________________________________________________________________

(If signed by representative for applicant, state capacity)
SUBMITTAL CHECKLIST: Including, but not limited to the following:

- Notarized owners certificate as per Appendix A of the Subdivision Control Ordinance.
- Statement of approval from County Health Department, if applicable.
- A filing fee as established by the adopted fee schedule.
- A Primary Plat as per Section 402.03 of the Subdivision Control Ordinance.
- Protective Covenants of proposed subdivision.
- Names and addresses of all Interested Parties as defined in By-Laws.
- Drainage and Erosion Control Plans as required.

ADDITIONAL REQUIREMENTS FOR MAJOR SUBDIVISIONS AS FOLLOWS:

- Location and boundaries of any lots in previously approved subdivisions.
- Topographic map at two foot intervals.
- Proposed public roads/streets and easements depicted on plat.
- Parcels to be dedicated for public or semi-public use.
- Construction plans and documentation to show that standards of Article Five are met in construction improvements.

NOTE 1: Additional requirements for Secondary Approval are listed in Section 405 and 406 of the Subdivision Control Ordinance.

NOTE 2. Fulfilling requirements for dedication of improvements and notification for inspection of same during construction is the responsibility of the Subdivider.

NOTE 3. Upon approval of a Subdivision, the Subdivider shall record the Plat with the County Recorder’s Office and shall transfer it to the County Auditor’s Office.