Appendix D - Plat Application



County Engineers' Office

3151 SE Inner Loop, Suite B Georgetown, TX 78626 Telephone (512) 943-3330 Fax (512) 943-3335 Email:development@wilco.org

PLAT APPLICATION

SUBJECT PROPERTY INFORMATION											
APPLICATION DATE*:		RESUBMITTAL: YES NO									
PROJECT NAME:				•							
PROJECT ADDRESS OR LOCATION:											
IF RESUBMITTAL, PROJECT FORMERLY KNOWN AS:											
NUMBER OF LOTS:		TOTAL ACREAGE:									
JURISDICTION:CITY LIMITSETJOUTSIDE ALL CITY LIMITS AND ETJs											
II. This application shall expire five (5) years from the Application date if the project becomes dormant, as defined by Sec. 245.005, Texas Local Government Code, as amended. This application shall expire forty five (45) days from the date the Application is submitted if, after proper notification, the Application remains incomplete, as defined by Sec. 245.002e, Texas Local Government Code, as amended.											
TYPE OF APPLICATION											
☐ PRELIMINARY PLAT	☐ PRELIMINARY PLAT ☐ CONSTRUCTION PLANS ☐ FINA				_ AM	ENDED PLAT	/ REPLA	T MINOR PLAT			
DIGITAL FILE SUBMISSION											
□ ADOBE .pdf and □ AutoCAD .dwg to COUNTY ENGINEER (email: development@wilco.org) □ ADOBE .pdf and □ AutoCAD .dwg to 911 ADDRESSING (email: gis@wilco.org)											
CONTACT INFORMATION											
AGENT INFORMATION				PROPERTY OWNER INFORMATION							
FIRM NAME:				OWNER NAME:							
CONTACT:	(CONTACT:									
ADDRESS:	,	ADDRESS:									
CITY:	STATE: ZIP:		(CITY: STATE:				ZIP:			
PHONE: ()	FAX: ()	F	PHONE: ()		FAX: ()			
EMAIL:			E	EMAIL:							
DEVELOPER INFORMATION				SURVEYOR INFORMATION							
FIRM NAME:				FIRM NAME:							
CONTACT:				CONTACT:							
ADDRESS:				ADDRESS:							

CITY:	STATE:	ZIP:		CITY:	STATE:		ZIP:					
PHONE: ()	FAX:	()		PHONE: ()	FAX: (
EMAIL:				EMAIL:								
ENGINEER INFORMATION				OTHER CONTACT INFORMATION (IF DIFFERENT)								
FIRM NAME:				OWNER NAME:								
CONTACT:				CONTACT:								
ADDRESS:				ADDRESS:								
CITY: ST	ATE:	IP:		CITY:	STATE	:	ZIP:					
PHONE: () FAX: ()				PHONE: ()	FAX: ()							
EMAIL:		EMAIL:										
PROPERTY OWNER CONSENT/AGENT AUTHORIZATION												
By my signature, I hereby affirm that I am the property owner of record, or if the applicant is an organization or business entity, that authorization has been granted to represent the owner, organization or business in this application. I certify that the preceding information is complete and accurate, and it is understood that I agree to the development/subdivision of this property.												
Signature:		-	Date:									
Signature:	ne:		Date:									
By signing this form, the owner of the property owner authorizes Williamson County to begin proceedings in accordance with the process for this type of application indicated on page one of this application. The owner further acknowledges that submission of an application does not in any way obligate the County to approve the application and that although County staff may make certain recommendations regarding this application, the Commissioners Court may not follow that recommendation and may make a final decision that does not conform to the staff's recommendation.												
		CALC	ULATI	ON OF FEES								
\$550 + lots x \$40 per				PLAT: feet road x \$1.00 +lots x \$25 per lot	AMENI REPLA \$550	DED PLAT / T:	MINOR PLAT: \$550					
RECEIPT BY WILLIAMSON COUNTY (Office use only)												
Date Application Received:// 20				Date Application Accepted / Rejected: / / 20								
Signature:				Signature:								
Receipt of this application by Williamson County does not provide confirmation or acceptance of a complete application, nor does it waive requirements for any additional information not contained as part of this application which may also be needed as a part of the review process.												