## 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 LOCATIO	DN:									
IF RESUBMITTAL, PR	OJECT FOR	MERLY KNO\	WN AS:								
NUMBER OF LOTS:		TOTAL ACREAGE:									
JURISDICTION:	URISDICTION: CITY LIMITS					ETJ OUTSIDE ALL CITY LIMITS AND ETJS					
*This application shall expire five (5) days from the date the Application is							nis application shall expire forty five (45) amended.				
TYPE OF APPLICATION											
☐ PRELIMINARY PL	☐ PRELIMINARY PLAT ☐ CONSTRUCTION PLANS			☐ FINAL PLAT		☐ AN	☐ AMENDED PLAT / REPLAT				
						•					
			DIGITAL FILE	SUBMISSION							
☐ ADOBE .pdf and ☐ AutoCAD .dwg to COUNTY ENGINEER (email: <a href="mailto:development@wilco.org">development@wilco.org</a> ) ☐ ADOBE .pdf and ☐ AutoCAD .dwg to 911 ADDRESSING (email: <a href="mailto:gis@wilco.org">gis@wilco.org</a> )											
				( ca g.ccore.	<u>u</u> /						
			CONTACT II	NFORMATION							
A	N	PROPERTY OWNER INFORMATION									
FIRM NAME:		OWNER NAME:									
CONTACT:		CONTACT:									
ADDRESS:		ADDRESS:									
CITY:	STATI	E:	ZIP:	CITY:	STATE:		ZIP:				
PHONE: ( )		FAX: (	)	PHONE: ( )		FAX:	( )				
EMAIL:		EMAIL:									
DEVELOPER INFORMATION			s	SURVEYOR INFORMATION							
FIRM NAME:		FIRM NAME:									
CONTACT:		CONTACT:									
ADDRESS:		ADDRESS:									
CITY:	STATI	E:	ZIP:	CITY:	STA	TE:	ZIP:				

PHONE: ( )	FAX: (	)	PHONE: ( )		FAX: (	)				
EMAIL:			EMAIL:							
ENGINEER IN	N	OTHER CONTACT INFORMATION (IF DIFFERENT)								
FIRM NAME:			OWNER NAME:							
CONTACT:		CONTACT:								
ADDRESS:		ADDRESS:								
CITY: STATE:	Ž	IP:	CITY: STA			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:		Printed Name:			Date:					
Signature:		Printed Name:		D	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.										
CALCULATION OF FEES										
PRELIMINARY PLAT: \$500 + lots x \$30 per lot = \$	lots x \$3	TION PLANS: 0 per lot + d x \$1.00 per foot	FINAL PLAT: \$500 + feet road x \$1.00 per foot + lots x \$25 per lot = \$		AMENDED PLAT / REPLAT: \$500					
RECEIPT BY WILLIAMSON COUNTY (Office use only)										
Date Application Received:/		Date Application Accepted / Rejected: / / 20								
Signature:	S	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.										