

FINAL PLAT APPLICATION

1.	SUBDIVISION NAME:					
2.	PROPERTY LOCATION:					
3.	ZONING OF PROPERTY:	PROPOSED COMMENCEME	NT DATE:			
4.	PROPOSED USE(S) (e.g., single family, multi-family, retail, office, industrial):					
5.	LEGAL DESCRIPTION (attach if description is metes and bounds description):					
6.	TOTAL NO. OF LOTS:	COMMON AREA AGREAGE:	TOTAL ACRES:			
7.	APPLICANT (DEVELOPER)	PHON	E			
	CONTACT PERSON	FAX				
	ADDRESS	CITY/STATE/ZIP				
	E-MAIL					
8.	PROPERTY OWNER	PHON	E			
	CONTACT PERSON	FAX _				
ADDRESS CITY/STATE/ZI		IP				
	E-MAIL					
9.		PHON	Ε			
	CONTACT PERSON	FAX				
	ADDRESS	ESS CITY/STATE/ZIP				
	E-MAIL					
10.		PHON	E			
	CONTACT PERSON	FAX				
		CITY/STATE/Z	IP			
	E-MAIL					
All applications require the signature of the owner on the application and on the ownership affidavit. Applications without the proper signatures will be deemed incomplete and will not be processed.						

 Receipt #:
 Date Filed:
 Processed by:
 Application #

REVISED APRIL 2019



OWNERSHIP AFFIDAVIT

STATE OF INDIANA)							
COUNTY OF HAMILTON)	SS.						
Comes now		(owner)						
who being duly sworn upon his/her oath, does state that he/she is the owner of the								
property legally described in the proposed plat, titled								

and acknowledges the submission of the application for subdivision of said property under the City of Lee's Summit Unified Development Ordinance.

Dated this	day o	f	, 20		
	Sont Fr	ingues fr			
Signature of Owner					
	Printed Name				
Subscribed and sworn to before me this	21st	day of August	, 20 24		
	Milissad	Biour			
MELISSA L. BROWN	Notary	Public			
SEAL Notary Public, State of Indiana Hamilton County Commission Number NP0649138 My Commission Expires November 18, 2029	11.18.2029				
	My Commi	ssion Expires			