



BUTLER COUNTY DEPARTMENT OF DEVELOPMENT—PLANNING DIVISION
Application for Subdivision Plat Review

Submit this form with all subdivision plats and re-plats to be reviewed by the Butler County Planning Commission.

Subdivision Name	Section	Block
------------------	---------	-------

- Preliminary Plat
 Final Plat
 Replat
 Reason for Replat: _____
 Extension of Unexpired Preliminary Plat; provide date of prior approval: _____

Township	PLSS Section	Town	Range
----------	--------------	------	-------

Attach additional sheets as needed

Parcel Numbers Involved	- - - - -	- - - - -	- - - - -
	- - - - -	- - - - -	- - - - -

Total Acreage	ac.	Total Number of Lots	This space reserved for office use
Buildable Acreage	ac.	Number of Buildable Lots	
Open Space Acreage	ac.	Number of Open Space Lots	
Right-of-Way Acreage	ac.	Right-of-Way Linear Feet <i>l.f.</i>	

APPLICANT REQUIRED	Name:			
	Address:			
	City:		State:	ZIP
	Phone:		If applicant is an organization or business, provide name of primary contact person in charge of this project:	
	Email:			

Note: All correspondence from the Department of Development will be directed to the Applicant as listed above. If alternate or additional contacts are desired, please so indicate on a separate sheet.

LANDOWNER	Name:				<input type="checkbox"/> same as applicant
	Address:				
	City:		State:	ZIP	
	Phone:		If landowner is an organization or business, provide name of primary contact person in charge of this project:		
	Email:				

DEVELOPER	Name:				<input type="checkbox"/> same as applicant <input type="checkbox"/> same as landowner
	Address:				
	City:		State:	ZIP	
	Phone:		If developer is an organization or business, provide name of primary contact person in charge of this project:		
	Email:				