



OWEN COUNTY PLAN COMMISSION

**86 E Market Street
Spencer, Indiana 47460
(812) 829-5033**

SUBDIVISION PROCEDURE

A Subdivision is the division of property into two or more lots, parcels, sites, units, plats, or interests for the purpose of offer, sale, lease, or development, either on the installment plan or upon any and all other plans, terms, and conditions, including re-division or amendments to previously recorded plats. Subdivision includes the division or development of land zoned for residential and nonresidential uses, whether by deed, metes and bounds description, devise, intestacy, lease, map, plat, or other recorded instrument. There are 3 forms of subdivisions: (1) Administrative, (2) Minor, and (3) Standard.

Fill out the enclosed application and return, with the required application fees, to the Owen County Building/Planning Department. Upon return of the application you will be notified within the next 30 days of the Preliminary/Final Plat Approval hearing date.

Subdivision Application # _____

OWEN COUNTY PLAN COMMISSION SUBDIVISION APPLICATION

**This application must be submitted with the required application fee.
All fees are non-refundable regardless of the outcome of the request.**

APPLICANT INFORMATION		
NAME:		
ADDRESS:		
CITY:	STATE:	ZIP:
OWNERSHIP STATUS: ☐ OWNER ☐ AGENT ☐ CONTRACT BUYER		
SUBDIVISION INFORMATION		
NAME AND ADDRESS OF PROPERTY OWNER:		
NAME, ADDRESS, AND PHONE NUMBER OF ENGINEER:		
NAME, ADDRESS AND PHONE NUMBER OF SURVEYOR:		
PROPOSED SUBDIVISION NAME:		
TYPE OF SUBDIVISION: ☐ STANDARD ☐ MINOR ☐ ADMINISTRATIVE		
GENERAL LOCATION:		
LEGAL DESCRIPTION: ATTACH AND LABEL AS EXHIBIT "A"		
MAPPING #:	SECTION: _____ TOWNSHIP: _____ RANGE: _____	

CURRENT ZONING CLASSIFICATION: ☐ Residential (select one) ☐ Business ☐ Industrial (select one) ☐ Agricultural ☐ Institutional/Public ☐ Estate ☐ Light ☐ Single Family ☐ Heavy ☐ Multi-Family ☐ Mineral Extraction *If the property associated with this request is not currently zoned as residential you must also file a Request for Re-zone and pay the appropriate fee.		
TOTAL ACREAGE:	# OF PROPOSED LOTS:	AVERAGE SIZE OF LOTS:
ELECTRICAL SOURCE:	WATER SOURCE:	SEWAGE DISPOSAL SOURCE: * If source is septic must have County Health Department Approval

I swear or affirm under the penalties for perjury, that the foregoing representations are true to the best of my knowledge and belief.

Applicant Signature

Date

I authorize this application and authorize the Plan Commission, Board of Zoning Appeals, its staff, and such other persons as the staff may deem appropriate to enter upon the property involved in this request for the purpose of analyzing this request.

Owner Signature

Date

Owner Signature

Date

*The following documentation is to be supplied at the time of submission of the application:

- ☐ Deed
- ☐ Copy of Plat (Preliminary may be in ordinary black and blue line copy, Final must be in mylar format)
- ☐ List of landowners and mailing addresses within 660 feet
- ☐ Authorization of Owner, if not fee simple owner
- ☐ Copy of Restrictive Covenants, if any
- ☐ Application Fee (Non-refundable)
- ☐ Subdivision Checklist

