



DEVELOPMENT APPLICATION

Submission of an application does not indicate acceptance by the City of Saint Hedwig

Type of Request:

- | | |
|---|---|
| ☐ Annexation | ☐ Preliminary Plat |
| ☐ Zone change | ☐ Final Plat |
| ☐ Zoning Variance | ☐ Replat |
| ☐ Special Use Permit | ☐ Amending Plat |
| ☐ Other: _____ | ☐ Minor Plat |
| | ☐ Plat Waiver |

PROPERTY DESCRIPTION:

Proposed Subdivision Name: _____

Blocks and Lots: _____

General Property Location (Street name and block number or nearest cross street): _____

Current Legal Description (abstract and tract number): _____

Acreage: _____ Intended Land Use: _____

Current Zoning (including the number of acres contained within each district): _____

Proposed Zoning (including the number of acres to be contained within each district): _____

Are any modifications to public facilities required with this proposed facility? ☐ Yes ☐ No

PROPOSED BUILDING STATISTICS:

Number of Lots Proposed:

Single Family Lots _____

Commercial Lots _____

Industrial Lots _____

Other (Specify): _____

Smallest Lot:

Lot# _____

Lot Size: _____

Largest Lot: _____

Lot# _____

Lot Size: _____

Average Lot Size: _____

If Residential:

Number of Units: _____

Acres: _____

Density (units/Acre): _____

SIGNATURES:

Property Owner/Agent:

Name: _____

Signature: _____

Mailing Address: _____

Developer:

Name: _____

Signature: _____

Mailing Address: _____

City: _____ State: _____

Zip Code _____

Telephone () _____

Email: _____

City: _____ State: _____

Zip Code _____

Telephone () _____

Email: () _____

Design Engineer or Land Planner:

Name: _____

Signature: _____

Mailing Address: _____

City: _____ State: _____

Zip Code: _____

Telephone: () _____

Email: _____

Surveyor:

Name: _____

Signature: _____

Mailing Address: _____

City: _____ State: _____

Zip Code: _____

Telephone: () _____

Email: _____

ACKNOWLEDGMENTS

I certify that I am the actual owner of the property described above and this application is being submitted with my consent (include corporate name if applicable) OR I am authorized by the property owner to submit this application and have attached written evidence of such authorization AND that I have reviewed the application, and all information submitted here in is true and correct.

Property Owner's Signature

Date

Property Owner's Name, printed

OFFICE USE ONLY

Fee Paid: _____

Received by: _____

Date Application Deemed Complete: _____

Case No: _____

Date Received: _____