



# City of Oskaloosa, Iowa

## Public Works Department

220 South Market Street, Oskaloosa, IA 52577

Phone: (641)673-7472 Fax: (641)673-3733

### PRELIMINARY/FINAL PLAT APPLICATION

#### Plat Information

Preliminary Plat (or)  Final Plat

Property Address: \_\_\_\_\_

Legal Description (attach if lengthy): Lot(s): \_\_\_\_\_ Block: \_\_\_\_\_

Addition: \_\_\_\_\_

Current Zoning: \_\_\_\_\_

Proposed Zoning: \_\_\_\_\_

Current Land Use: \_\_\_\_\_

Proposed Land Use: \_\_\_\_\_

Total Area: \_\_\_\_\_ acres (or) \_\_\_\_\_ square feet

Location map of properties involved attached

Description(s) and survey attached

Revised description(s) and survey attached

Project Description: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

#### Contact Information

Applicant: \_\_\_\_\_

Name (to be used on legal documents)

Phone

Address

Email

Consultant: \_\_\_\_\_

Name

Phone

Address

Email

Owner: \_\_\_\_\_

Name

Phone

Address

Email

#### **Contact Information:**

*Public Works Dept.*

**Shawn Christ**

shawn.christ@oskaloosaiowa.org

*Building Official*

**Mike Flahive**

mike.flahive@oskaloosaiowa.org

*Develop. Services Director*

**Shawn Christ**

shawn.christ@oskaloosaiowa.org



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### OFFICE USE ONLY

Application Fee:  Preliminary Plat \$ \_\_\_\_\_  Final Plat \$ \_\_\_\_\_  
\$30.00 + \$5.00 per lot \$50.00 + \$5.00 per lot

Date Fee Paid: \_\_\_\_\_

Planning & Zoning Commission Action: \_\_\_\_\_ Date: \_\_\_\_\_

City Council Action: \_\_\_\_\_ Date: \_\_\_\_\_

Conditions and/or Requirements: \_\_\_\_\_

**PLEASE NOTE:** All applicants must include a copy of the property owner's *Duplicate Certificate of Title* if the property is recorded. Applications are not complete until all required submissions have been received.

**ACKNOWLEDGEMENT AND SIGNATURE:** The undersigned applicant hereby represents upon all of the penalties of the law, the purpose of inducing the City of Oskaloosa to take action herein requested, that all statements herein are true and that all work herein mentioned will be done in accordance with the ordinances of the City of Oskaloosa and the laws of the State of Iowa, and that the undersigned applicant will pay all fees and charges incurred by the City for the examination and review of this petition.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Owner Signature: \_\_\_\_\_ Date: \_\_\_\_\_