TOM GREEN COUNTY

Subdivision Application Form (Please Print or Type)

Document must be filled out COMPLETELY, leaving no blank areas. N/A may be used if appropriate

Name of Proposed Subdivision:	
Location:	
Has Plat been reviewed by Plat Reviewer? Yes NoSTOP! PLAT MUST BE REVIEWED BY PLAT REVIEWER	
Is location within the ETJ? YesSTOP! PLAT MUST BE FILED WITH CITY No TGC Pct. #	
Type of Request: Preliminary Final Replat Amended Vacation Revised	
Owner(s) of Subdivision:	
Address:	
Phone # Fax:	
Existing Land Use:	
Proposed Land Use:	
Total Acreage: Number of Proposed Lots:	
Proposed Source of Water Supply: Individual Well Water Supply	
Name of Water System	
Proposed Sewage Disposal System: Individual Septic Tank	
Private Sewage System	
Are any off-site drainage, access or other easements necessary for this subdivision? No Yes(Please explain)	

Are there existing d	eed restrictions of give the deed red		No	_ Yes	
Volume			Number (i	f Vol and Page	e Not
Available)				_	
,					
Are there any devia		•	livision rul	es & regulatio	ns requested?
No					
(Please explain)					
The owner hereby d					
as the official repres	sentative	(Name)			
as the official repres					
	Email addres	SS:			
Application fee (\$1:	50 00 + 10 00 pe	r lot) Paid by Owne	r		
Representative					's office prior to
placement on the C					
taxes owed, and rec		•	•		_
The owner is aware	e that there will	be an additional fil	ing fee aft	<u>er</u> approval by	the Tom Green
County Commission	ners Court. The	filing fee will also b	be paid to t	he Tom Green	County Clerk at
the time of filing of	the plat for the re	ecords.			
The undersigned he					
for the development					<u> </u>
Commissioners Cou				e information (contained on this
application is true a	nd accurate to the	e dest of my knowle	eage.		
***(Note to application ***	ant – ensure all :	areas are filled out	complete	ly before signi	ing. N/A may
be used if appropr		areas are inica out	Complete	ly before sign	ing. 1 Wil may
0 , 0					
Owner's Signature			Date		
Representative's Signature			Date		
Total Paid: \$		Date Paid			
		2			
Date of Commission	ner's Court Actio	on:			

 $\label{eq:final_plat_regular} FYI-FOR\ FINAL\ PLAT\ REQUIREMENTS,\ SEE\ SUBDIVISION\ REGULATIONS\ SECTION\ III\ FINAL\ PLAT$