



APPLICATION FOR PLATTING

County of Sibley
Gaylord, MN 55334

Permit No. _____	
Preliminary Plat: \$400 + \$100 per lot	
Final Plat: \$400	

Date _____ P.I.D. No. _____ Property Address: _____

City: _____ State: _____ Zip: _____

LEGAL DESCRIPTION OF PROPERTY: _____

Township _____ Range _____ Section _____

OWNER: Name _____ Address _____

Phone: _____ Email: _____

Signature: _____

APPLICANT (if different): Name _____ Address _____

Phone: _____ Email: _____

Signature: _____

Please attach a preliminary or final plat prepared by a registered surveyor and legal descriptions showing both current and proposed conditions. Also attach any relevant supporting documentation.

CURRENT ZONING: _____ CURRENT USE: _____

NUMBER OF LOTS PROPOSED: _____ SIZE RANGE OF LOTS: _____

ADDITIONAL INFORMATION:

OFFICE USE ONLY:

Received: _____ Notice Published: _____ Planning Commission Meeting: _____

County Board Meeting: _____ Owner/applicant notification: _____ Recorded: _____