

Our Mission...

*...to be responsible stewards of the public trust,
to strive for excellence in public service, and
to enhance the quality of life for all.*



Application For

Preliminary Plat

Final Plat

All rules and regulations established by the Subdivision Ordinance, City of Wylie, Texas, and Texas Local Government Code, Title 7, chapter 212, Subchapter A. Please review the Subdivision Fee Schedule for all applicable fees, as all fees must be paid prior to filing the Plat with County.

Engineer/

Surveyor: _____ Phone: _____

Address: _____

City: _____ State: _____ Zip: _____

Owner: _____ Phone: _____

Address: _____ Fax: _____

City: _____ State: _____ Zip: _____

Other: _____ Phone: _____

Address: _____ Fax: _____

City: _____ State: _____ Zip: _____

Location of Property (Address if Applicable) _____

Proposed Subdivision Name: _____

Survey Name: _____ Abstract No.: _____ Acreage: _____

Existing Zoning: _____ Pending Zoning: _____ Date of Pre-Development Meeting _____

***Please provide a building improvement survey if the property has existing improvements.**

****Please Note: All presentation material must be received by Staff on the Monday the week prior to the meeting. This will be the case for both P&Z and City Council.**

I am authorized to make application for a subdivision on behalf of the owner of this property.

Agent

Whereas, I the applicant or owner, hereby declare my intent to seek approval of this plat as soon as possible and acknowledge that the City can and must deny this plat if it fails to comply with City Ordinances and that such denial would, of necessity, delay the desired approval. Therefore, I hereby waive the time periods of Chapter 212, Texas Local Government Code, in order that I can have a chance to work with City Staff to seek an approval with the least number of delays.

Agent/Owner

The above person is my representative, authorized to make application for a subdivision on my behalf and I am the owner of the property for which this application is made.

Owner

For Office Use Only: Date Filed: _____ **Receipt No.:** _____ **Amount \$** _____

P&Z Date _____ **City Council Date** _____