Scott's Near	OF SBLUFF ASKA		sbluff, Nebraska an Amended Plat
Date:			DO NOT WRITE IN THIS BLOCK
Address (Location):			Permit Number:
Applicant's Name			Plat
Applicant's Address:			Approved Denied  Date Issued:
City:	State:	Zip:	Comp. Plan Land Use: Zone:
Telephone:	Mobile:	Email:	Attached:
Property Owner:			Copy of Amended Plat
· <i>'</i>			Legal Description (in Word)  \$ 50.00 filing fee
Property Owner's Address:			Letter of transmittal
City:	State:	Zip:	Receipt #
Telephone:	Mobile:	Email:	
Engineer or Surveyor:			Total Acreage:
Engineer or Surveyor Address:			Proposed number of lots:
City:	State:	Zip:	Present Use of Property:
Telephone:	Mobile:	Email:	Proposed Use of Property:
Location of property:			Present Zoning:
Please provide the	following:		
Copy of Ame	ended Plat (3.5" diskette or CI	O-ROM in AutoCAD format)	
• •	, , , -		nes, irrigation canals, future street widths,
	existing structures, proposed ption on a CD/Disk (in Word)	structures, easements, etc)	
	g fee (if not submitted with ap	proval of Preliminary Plat)	
Letter of trai	•	<b>,</b> , , , , , , , , , , , , , , , , , ,	
establishing minimum and plan to be prepar	subdivision design standards red. He/she certifies that all r	to be installed by the subdivision equirements of Ordinance No. 3	Ordinance No. 3410 and amendments thereto, on and that he/she has caused said preliminary plat 410 and amendments there to have been met and I have also read and am familiar with the City

Ordinances and will comply with these requirements; and that the statements herein contained are true and correct to the best of my

**Development Services Department** 

Remarks: (Insert here any information not covered above)

knowledge and belief.

Applicant's Signature:

Date: