



Planning and Development Application

P.O. Box 66, Strafford, Missouri 65757

(417) 736-2154 / Fax (417) 736-2390

Application Type: *Check all that apply.*

- | | | |
|---|---|---|
| <input type="checkbox"/> Annexation | <input type="checkbox"/> Rezoning | <input type="checkbox"/> Replat (Combo/Split/Line Adjustmt) |
| <input type="checkbox"/> Preliminary Plat | <input type="checkbox"/> Final Plat | <input type="checkbox"/> Minor Subdivision |
| <input type="checkbox"/> Vacation of Street | <input type="checkbox"/> Vacation of Easement | <input type="checkbox"/> Vacation of Right-of-Way |
| <input type="checkbox"/> PUD Sketch | <input type="checkbox"/> PUD Preliminary Plat | <input type="checkbox"/> PUD Final Plat |
| <input type="checkbox"/> Conditional Use | <input type="checkbox"/> Appeals (Variance) | <input type="checkbox"/> Other: _____ |

*Add N/A if any of the following does not apply for your application.

Location of Property: Address: _____

Legal Description (or provide separately): _____

Property/Land Details:

Size of Property: Square Feet _____ Acreage _____

Existing Use(s): _____ Existing Zoning: _____ Requested Zoning: _____

Proposed Use: Residential Subdivision Commercial Subdivision Other N/A

Additional details for your request:

Legal Owner Information:

Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Email: _____ Phone Number: _____

Owner Representative Information:

Name & Company: _____ Relation to Owner: _____

Address: _____ City: _____ State: _____ Zip: _____

Email: _____ Phone Number: _____

*For a conditional use, the applicant shall be the person applying for a conditional use.

Office Use Only

Staff complete all that apply.

Date Application Received: _____

Fees Paid On: _____

Amount Paid: _____

Public Notice Sent to Paper: _____

Mailings Sent to Property Owners within 185' (if required): _____

*Goes before Planning and Zoning Commission: _____

*Goes before Board of Alderman (1st Hearing): _____

*Goes before Board of Alderman (2nd Hearing): _____

Ordinance Number: _____

*Dates are subject to change based on the motions made at the meetings.