



Community Development Department
 1700 N. 4th Ave. W.
 Newton, IA 50208-1926
 641-792-6622 FAX 641-792-0670
www.newtongov.org

Planning & Zoning
Application
Plat-of-Survey

Office Use Only
 Submittal Date _____
Fee: \$25.00
 Date Fee Paid _____
 Receipt # _____
 File # **PS-** _____

Please complete the following information:

Name of Applicant	Mailing Address	Daytime Telephone
Interest in property:	Owner	Agent
		Other (explain):

Name of Owner (if different)	Mailing Address	Daytime Telephone
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- Type of survey action: lot-line-adjustment division of tract or lot division of duplex lots
- Street Address or Common Description: _____
- Legal Description: _____
- Zoning of property: _____ • A change in zone is is not anticipated.
- Size of parcel sq. ft. Acres: _____ • Proposed total number of lots: _____

To be provided with completed application: Three (3) originals for approval with "City of Newton" signature block.

 Signature of Applicant Date

Revised 12/2006

Sample Signature Block:

Approved:

Erin Chambers, City Planner
City of Newton, Community Development

Date

Please fill out, print off and mail to above address.