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
Preliminary Plat

Submitted Date_____

Fee: $100.00

Date Paid_____

Receipt #_____

File #PP-_____

After compliance with the pre-application procedures a developer may proceed to submit a preliminary plat application. The preliminary plat procedures are found in Article 4 of the Newton Subdivision Ordinance.

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

- Street Address or Common Description: _____
- Name of proposed subdivision: _____
- Legal Description: _____
- Existing use of property: _____
- Zoning of property: _____
- A change in zone ☐ is ☐ is not anticipated.
- Size of parcel ☐ sq. ft. ☐ Acres:_____
- Proposed total number of lots:_____
- Date of Pre-Application Conference:_____

❖ If any waivers are being sought in accordance with Article 10 of the Newton Subdivision Ordinance, please put them in writing and attach to this application.

❖ **If a request to waive is not attached to this application, the city planner will construe the applicant is adhering to all subdivision requirements.**

Items to be provided with completed application as required by city planner per pre-application conference.

_____ _____

Signature of Applicant Date

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

Revised 12-2006