SHORT-FORM PLAT LOT SPLIT APPLICATION

This form must be completed and filed at the office of the Zoning Administrator in accordance with directions on the accompanying instruction sheet.

AN INCOMPLETE APPLICATION CANNOT BE ACCEPTED.

1.	Name of applicant or applicants (owner (s) and/or their agent (s). All owners of all property requesting the Lot Split(s) must be listed on this form.	:
A.	Applicant/Owner Gilbert Loewer Address Phone 620 - 983 - 26 Agent Cell 620 - 382 - 620 Address Phone	74 06
B.	Applicant/Owner Phone Agent	
	Address Phone Applicant/Owner Address Phone Agent Address Phone	
Sig (Us	nature of Record Land Owner: Supplicants.) e separate sheet if necessary for names of additional owners/applicants.) General Location of Property: 1429 E Huy 50	
2. I	egal Description of Property: NW Auarter of Section 5 Town Ship 22 South, Range 3 East of 6th P.M.	

	3. Existing Zoning of Property:						
	4. Gross Property Acreage: /4/8,	98					
	5 Evicting Charat D' 14 C.W. Will						
	6. Proposed Dimensions of the Lot(s):						
	about Tract A: 4/0 ft. By 550 ft.	Tract B: _	ft. Byf	t.			
	7. Proposed Lot(s) Frontage:						
	about Tract A: 410 ft.	Tract B:	ft.				
	8. Proposed Lot(s) Area:						
	Tract A:Acres	Tract B:	Acres				
	9. Is there a public water supply available to s	serve the proposed	Lot(s)?				
	Yes	NO					
	10. Is there a public sanitary sewer available to serve the proposed Lot(s)?						
	Yes	NO					
11. Will the proposed Lot(s) be directly accessed by a public gravel or paved road?							
	Yes	NO					
12. Does the proposed Lot(s) contain an existing residence?							
	Yes	NO					
	13. Is a new street or alley required or proposed	d?					
	Yes	NO					
	14. Is a vacation of streets, alleys, setback lines, access control or easements required or proposed?						
	Yes	NO					
	15. Has this Lot been previously split?						
	Yes	NO					

I (we), the applicant(s), acknowledge receipt of the instruction sheet explaining the method of submitting this application. I (we) realize that this application cannot be processed unless it is completely filled in; is accompanied by nine copies of a scale drawing and a legal description of the lots involved including the location of any existing structures as required in the county subdivision regulations; further the agricultural disclaimer as set forth in the county comprehensive plan is attached to the scale drawing and legal description; and is accompanied by the appropriate fee. Further the owner herein agrees to comply with the Marion County, Kansas Subdivision Regulations and all other pertinent Orders or Resolutions of the County as are determined to be applicable, and the Statutes of the State of Kansas. It is agreed that all costs of recording the Lot Split and supplemental documents thereto with the Register of Deeds shall be assumed and paid by the owner when billed. The undersigned further states that he/she is the owner of the property proposed for the lot split.

Authorized Agent (if any)

Authorized Agent (if any)

Signature of Record La	nd Owner	Signature of R	ecord Land Owner		
7. Office Use Only: This application was received at the office of the Zoning Administrator at(M.) on It has been checked and found to be completed and accompanied by required documents and the appropriate fee of \$25.00.					
	Planning & Zo	oning Assistant	Date		
	Planning & Zo	oning Director	Date		