

MARION COUNTY COURTHOUSE

MARION COUNTY KANSAS
OFFICE OF THE PLANNING COMMISSION

P.O. BOX 157
MARION, KANSAS 66861
PHONE (620) 382-2550
Toll Free 1-800-305-8848

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 DENNIS P. KRAUSE
Address 2910 BURNSTEM LINCOLNVILLE, KS Phone 785-983-4887
Agent REAL ESTATE SPECIALISTS BECKY NUSS
Address HILLSBORO, KS 67063 Phone 620-947-2000

B. Applicant/Owner _____
Address _____ Phone _____
Agent _____
Address _____ Phone _____

C. Applicant/Owner _____
Address _____ Phone _____
Agent _____
Address _____ Phone _____

Signature of Record Land Owner: *Dennis P. Krause*
(Use separate sheet if necessary for names of additional owners/applicants.)

1. General Location of Property: 6.5 MILES EAST OF
LINCOLNVILLE ON 290th ROAD NORTH SIDE
OF ROAD

2. Legal Description of Property: S2 SE4 11-18-5

* ? 50'

3. Existing Zoning of Property: AGRICULTURAL

4. Gross Property Acreage: 5 ACRES (5.44)

5. Existing Street Right-of-Way Width: _____

6. Proposed Dimensions of the Lot(s):

Tract A: 489.98 ft. By 414.02 ft.

Tract B: _____ ft. By _____ ft.

7. Proposed Lot(s) Frontage:

Tract A: 489.98 ft.

Tract B: _____ ft.

8. Proposed Lot(s) Area:

Tract A: 5.44 Acres

Tract B: _____ Acres

9. Is there a public water supply available to serve the proposed Lot(s)?

Yes _____

NO X

10. Is there a public sanitary sewer available to serve the proposed Lot(s)?

Yes _____

NO X

11. Will the proposed Lot(s) be directly accessed by a public gravel or paved road?

Yes X

NO _____

12. Does the proposed Lot(s) contain an existing residence?

Yes X

NO _____

13. Is a new street or alley required or proposed?

Yes _____

NO X

14. Is a vacation of streets, alleys, setback lines, access control or easements required or proposed?

Yes _____

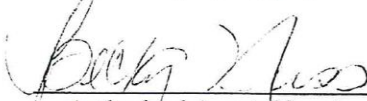
NO X

15. Has this Lot been previously split?

Yes _____

NO X

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 Land Owner

Signature of Record 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 & Zoning Assistant	Date
_____	_____
Planning & Zoning Director	Date