

City of Jarrell 161 Town Center Blvd. Jarrell, Texas 76537 Fax (512) 746-4593 <u>www.cityofjarrell.com</u>

Subdivision Name: _____

Submittal Date: _____

REPLAT APPLICATION & CHECKLIST

INSTRUCTIONS

- Fill out the following application and checklist completely prior to submission.
- Use the most current application from the City's website (<u>www.cityofjarrell.com</u>) or at City Hall.
- City ordinances can be obtained at City Hall or by emailing the City Planner at <u>i.moyer@cityofjarrell.com</u>.

PROCESS:

The applicant may meet with the City Manager or designee at a pre-development conference to determine if the proposed division is eligible for the replat process. If the City Manager or designee determines the proposed division is/is not eligible for replat, the applicant may request an appeal. Refer to Appeal of an Administrative Decision.

SUBMITTAL REQUIREMENTS:

The Developer shall submit a Replat application that includes all of the following: **<u>NOTE</u>**: THE REPLAT WILL NOT BE CONSIDERED "FILED" UNLESS ALL APPLICATION REQUIREMENTS ARE MET.

- **1.** Completed application form with owner's original signature.
- ____ 2. Subdivision name
- ____ 3. Submittal date
- 4. 2 paper copies 11" by 17" of the Replat with the title of the subdivision appearing on the outside (Replat content located on the City's website at <u>www.cityofjarrell.com</u> under Community Development Appendix A: Subdivision, Site Plan, Variance Forms and checklists)
- ____ 5. 1 Copy of the Replat Plat in pdf format.
- _____ 6. A copy of the deed(s) identifying the owners of the property.
- _____ 7. 2 copies of an Engineer's Report.
- **8.** If applicable, a City approved Traffic Impact Analysis.
- 9. A list of names and addresses of the owners of property that are in the original subdivision and that are located within 200 feet of the property contained in the Replat as recorded on the current tax roll including a diagram that identifies said properties and a key to the list provided.

SUBMITTAL REQUIREMENTS CONT:

The City Manager or designee will review the application for completeness within 5 days of receipt of the submittal materials. If the application is complete, the City Manager or designee will review the plat for technical compliance with the code, within 12 days of the determination of completeness. The City Manager or designee will also schedule a public hearing before the next regularly scheduled Planning and Zoning Commission. Published notice is required.

If the City Manager or designee determines that the plat does not meet the approval criteria, he or she will summarize the comments in a letter to the applicant. The applicant must respond within 12 days of the date of the comment letter, or the application will be recommended for statutory disapproval. In other words, the applicant must meet all the technical requirements, or the plat cannot be approved under the 30-day timeline.

FILING FEE CALCULATION:

Filing Fee:		500.00
	\$	
Plus \$20.00 per lot		
Staff Use Only: Check No. Additional Check No.		
TOTAL FEE (due at the time of application submission):	<u>\$</u>	

PROPERTY INFORMATION:

Property Address: _____

Legal Description: _____

CURRENT ZONING: _____

APPLICANT INFORMATION:

<u>Please Note:</u> The signature of owner authorizes City of Jarrell staff to visit and inspect the property for which this application is being submitted. The signature also indicates that the applicant or his agent has reviewed the requirements of this checklist and all items on this checklist have been addressed and complied with. The agent is the official contact person for this project and the single point of contact. All correspondence and communication will be conducted with the agent. If no agent is listed, the owner will be considered the agent. (Check One): _____I, the owner, will represent this application with the City of Jarrell. _____I, the owner, hereby authorize the person named below to act as my agent in processing this application with the City of Jarrell. **OWNERSHIP INFORMATION:** Property Owner: _____ Phone: _____ Fax: _____ (If property ownership is in the name of a partnership, corporation, joint venture, trust or other entity, please list the official name of the entity and the name of the managing partner.) Address: ______ City: _____ State: ____ Zip: _____ Email: Mobile: Pager: I hereby request that my property, as described above, be considered for a Minor Plat and I give City Staff and elected or appointed representative's permission to visit the site described in this application: Owner's Signature: Date: AGENT INFORMATION: If an agent is representing the owner of the property, please complete the following information: City: State: Zip: Address: Mobile: Pager: Email: *I hereby authorize the person named above to act as my agent in processing this application:* Owner's Signature: _____ Date: _____

I hereby attest that I prepared this application/checklist and that all information shown hereon is correct and complete to the best of my knowledge.

Signature	Name (printed)			
REPLAT APPLICATION AND CHECKLIST				
Approved by CM 6-18-2015				

Property Acreage: _____

County Short ID#:

Do not write below - Staff Use Only			
Accepted for Processing by:	_ Date:		
Application Approved: Yes No			
If no, reason for disapproval:			

City Manager/Designee Comments: