

SALINE COUNTY PLANNING BOARD

PLAT APPROVAL APPLICATION

Karla.Ramsey@salinecounty.org

1. SUBJECT PROPERTY			
Assessor's Parcel Number(s):			
Subject Property Address or Site Locat	on:		
Name of Development/Establishment,	Applicable:		
2. PROJECT DESCRIPTI	ON		
	AL	- - - - -	
Name:	Phone:		
Address:	Fax:		
City/State:	Zip:	-	
E-mail:			

4. APPLICANT (IF DIFFERENT FI	ROM OWNER)	
Name:	Phone:	
Address:	Fax:	
City/State	7:n.	
City/State:	Zip:	
E-mail:		
5. MAIN POINT OF CONTACT: If other: Name	OWNER DAPPLICANT DOTHER	
Phone Number:	Address:	
City/State:		_
6. BILL TO: □OWNER □APPLI	CANT □OTHER	
If other: Name		
Phone Number:	Address:	_
City/State:		
E-mail:		
7. OWNER/APPLICANT CERTIFIC	CATION	
 I understand there is no guarantee-exprunderstand that each matter must be calconducted by the Staff of the County Justaff/Board recommendation or decision preliminary discussions. I understand that additional information of my application. I certify that the information provided in correct to the best of my knowledge. 	e following: s on the applicant to substantiate the request. ressed or implied- that any approval will be granted. I refully evaluated and after the evaluation has been udge and the Saline County Planning Board, that on may be revised to a different position taken in any n, reports, studies, applications or fees may be required. For incomplete information may result in delays or denicin this application, including attachments, is accurate an ang, and agree to the submittal of this application. Date:	al
Print Name:	Check One: □Owner □Applicant	