

TOWN OF ADDISON
16801 Westgrove Dr.
Addison, Texas 75001

SUBDIVISION APPLICATION

Date: _____, 20____

1. Subdivision Name: _____

2. Preliminary Plat: _____ Final Plat: _____

3. Applicant: _____

Address: _____
(Street) (City) (State) (Zip)

Phone No. (____) _____ Fax No. (____) _____

4. Firm Preparing Plat: _____

Address: _____
(Street) (City) (State) (Zip)

Phone No. (____) _____ Fax No. (____) _____

5. Property Owner: _____

Address: _____
(Street) (City) (State) (Zip)

Phone No. (____) _____ Fax No. (____) _____

6. All correspondence relative to this application should be directed to:

Name: _____

Address: _____

City, State, Zip: _____

Phone No. (____) _____ Fax No. (____) _____

E-mail: _____

7. General location of property:

Filing fee check made payable to the TOWN OF ADDISON is enclosed in the amount of
\$ _____ (See Fee Schedule below)

RESIDENTIAL

Preliminary.....\$300.00
Final.....\$300.00

INDUSTRIAL, COMMERCIAL, APARTMENT, OR OTHER

Preliminary.....\$300.00
Final.....\$300.00

I certify that the above information is correct to the best of my knowledge.

Signature _____

Property Owner

OR

Authorized Agent for Property Owner

PAID

DATE _____ CK# _____ RECEIPT # _____