



LINCOLN COUNTY PLANNING DEPARTMENT

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FINAL PLAT APPLICATION

1. NAME OF SUBDIVISION: _____

2. LOCATION: _____ $\frac{1}{4}$ or $\frac{1}{2}$ _____ $\frac{1}{4}$ or $\frac{1}{2}$ | SECTION _____ TOWNSHIP _____ RANGE _____

FOR AMENDED PLATS: LOT(S) _____ BLOCK(S) _____ SUBDIVISION _____

3. APPLICANT NAME, ADDRESS, TELEPHONE NUMBER & EMAIL ADDRESS:

4. NAME, ADDRESS, TELEPHONE NUMBER & EMAIL ADDRESS OF PERSON(S) / FIRM(S) PROVIDING SERVICES AND INFORMATION (E.G.: SURVEYOR, ENGINEER, DESIGNER, PLANNING CONSULTANT, ATTORNEY):

5. DATE PRELIMINARY PLAT APPROVED BY GOVERNING BODY: _____

6. ATTACH LIST OF CONDITIONS FROM CONDITIONAL PRELIMINARY APPROVAL.

7. THE FOLLOWING FINAL PLAT SUBMITTAL MATERIALS ARE ATTACHED:

Two (2) Permanent Record Filing Copies (Mylars) of the Final Subdivision Plat designed pursuant to all statutory requirements of ARM 24.183.1107.

One (1) extra "clean" paper copy with recording data

Original Plan Check copy with recording data and comments for Planning Department.

The final plat MUST be signed by the following prior to submittal for final:

Owner(s) of record

Surveyor of Record

Examining Land Surveyor

Notary Public

Plat contains all local Governing Body conditions of Preliminary Plat Approval that are required to be on face of plat.

- A statement from the project surveyor or engineer outlining how each condition of approval has been met.
- All utility easements must be shown with dashed lines with the following statement on the face of the plat:

“The Undersigned hereby grants unto each and every person, firm, or corporation whether public or private, providing or offering to provide telephone, electric power, gas, cable television, water or sewer service to the public, the right to joint use of an easement for each construction, maintenance, repair and removal of their lines and other facilities, in, over, under and across each area designated on this plat as “Utility Easement” to have and hold forever.”
- Fees
 - Final Plat
 - Parkland (if applicable)
 - Subdivision/Weed Improvements Bond (if applicable)
 - Fire Risk Assessment Follow/Up
- Title Report from a Title Abstractor dated no less than 30-days prior to the date of submittal.
- A receipt from the County Treasurer stating that all real property taxes have been paid.
- Copies of any Exemptions, if required.
- Certificate from State D.E.Q. approving water, sewer and drainage plans and/or lifting of sanitary restrictions.
- Certification from a professional engineer that all improvements have been designed and completed to applicable standards.
- An Improvements Agreement with an acceptable form of guarantee or a copy of required public improvement plans with certification of a registered professional engineer that they have been completed in conformance with the plans.
- Certificate of Waiver of Parkland Dedication and Acceptance of Cash in Lieu Thereof (*if required parkland area is not specifically dedicated on final plat map*).
- Original signed & notarized Covenants, Conditions and Restrictions or Property Owners Association relating to the subdivision.
- Road Maintenance Agreements
- Public Road Approach Permit(s) if roads are created that will intersect with a public road.
- Certification (*if required*) that an irrigation district has approved the plans for the maintenance and integrity of its system affected by the subdivision.

CERTIFICATION OF DEVELOPER

I, _____, do hereby validate and say that all the
Owner / Developer

statements and information contained in all exhibits transmitted herewith are true and correct.
Therefore, I hereby apply to the Governing Body of Lincoln County for final plat approval of the

Subdivision known as _____ on this _____ day of
Subdivision Name Day
_____, 20____
Month Year

Applicant Signature

Date

Applicant Signature

Date

Surveyor/Engineer Signature

Date

FOR OFFICIAL USE ONLY BY THE LINCOLN COUNTY PLANNING STAFF

1. All items for final plat have been submitted and complete

Yes

No; *Items Missing or incomplete:*

2. Date Governing Body Signed Final Plat: _____

3. Reviewed by: _____