

Town of Haubstadt Plan Commission Application

1. Applicant/Property Owner

Applicant:

Name: _____

Address: _____

Phone number: _____

Fax number: _____

Property Owner (if different than applicant):

Name: _____

Address: _____

Phone number: _____

Fax number: _____

2. Applicant's Contact/Agent and Project Designer

Applicant's Contact/Agent (if applicable):

Name: _____

Address: _____

Phone number: _____

Fax number: _____

Project Designer (if applicable):

Name: _____

Address: _____

Phone number: _____

Fax number: _____

3. Plan Commission Request Information

Administrative Approval (creation of new lot): _____

Rezoning Request-proposed zoning: _____

Other: _____

Fee submitted/receipt number: _____

Major/Minor Subdivision Plat-number of lots: _____

Site Plan Review (square footage, number of units): _____

Plan Commission petition number: _____

_____ Submitted plan showing: lot dimensions and shape; location(s) of existing buildings; location/dimensions of proposed buildings or structures; acreage of parcel; building setbacks; and other information needed for adequate review

4. Property Information

Address of property: _____

Subdivision and lot number (if applicable): _____

Current use of property: _____

Current zoning of property: _____

5. Certification

I certify that the information provided on and with this application is accurate. This includes the plot plan, legal description, location of existing structures, and the location(s) and dimensions of any proposed structures.

Printed name: _____ Signature: _____ Date: _____

6. Owner's signature (if owner is different than applicant)

Printed name: _____ Signature: _____ Date: _____

Town of Haubstadt 101 South Main Street Haubstadt, IN
Phone: (812) 768-6451 Fax: (812) 768-0097