

# Preliminary Plat Application

City of

Return Completed Form To: Planning Department, City of Lexington, 329 W. Main St., Lexington,

IL 61753

**Lexington** [www.lexingtonillinois.org](http://www.lexingtonillinois.org)

## 1. Applicant & Contact Information

### Applicant/Primary Contact

Full Name \_\_\_\_\_  
Address \_\_\_\_\_  
City, State, Zip \_\_\_\_\_  
Phone \_\_\_\_\_  
Email \_\_\_\_\_

## 2. Owner Information

### Property Owner

Full Name \_\_\_\_\_  
Address \_\_\_\_\_  
City, State, Zip \_\_\_\_\_  
Phone \_\_\_\_\_  
Email \_\_\_\_\_

Is the owner a Trust, Corporation, LLC,  
Not for Profit or Partnership?

Yes No

## 3. Property Information

Name of Subdivision \_\_\_\_\_  
Subdivision Common Address: \_\_\_\_\_  
\_\_\_\_\_

Parcel ID Number \_\_\_\_\_  
- - - -

Gross Acreage of Subdivision \_\_\_\_\_  
Total Number of Proposed Lots \_\_\_\_\_  
Current Property Zoning \_\_\_\_\_  
Current Land Use \_\_\_\_\_  
Proposed Land Use \_\_\_\_\_

Is subdivision within City Corporate Limits?  
No Yes

Does subdivision involve an Annexation or  
Annexation Agreement with the City?  
No Yes

Requested Title Company: \_\_\_\_\_

A conference with Current Planning Staff is  
Encouraged. Have you had this conference?  
No Yes: Date \_\_\_\_\_

Is the subject property within a 100 year floodplain?  
No Yes

## Application Checklist

Please address the following items. Additional materials may be required during the review process. Incomplete applications will not be processed. Use the following checklist to confirm that your application is complete.

## Application

1. Applicant & Contact Information.
2. Owner Information, including additional submission requirements as needed.
3. Property Information.
4. Consultant Information
5. Legal Description of the property.
6. Applicant Signature.

## Attachments

- A. Deed or other proof of ownership.
- B. Preliminary Plat.
- C. Proposed Phasing Plan.
- D. Waiver Request Letter, if applicable.
- E. Declaration of Ownership.
- F. Electronic File Submission.
- G. Review Fee, see below.

Filing Fee. An application for approval of a preliminary subdivision plan shall be filed with the City Clerk and be accompanied by a fee receipt reflecting payment to the City Clerk of the appropriate fees as set forth in Chapter 63, Fees. 12

\*as required in City of Lexington Municipal Code

FOR STAFF USE: Application Complete

Received By: \_\_\_\_\_

Fee: \_\_\_\_\_ Date Paid: \_\_\_\_\_

Case No.: \_\_\_\_\_

# Preliminary Plat Application

## 4. Consultant Information

### Subdivider

Name \_\_\_\_\_  
Firm \_\_\_\_\_  
Address \_\_\_\_\_  
City, State, Zip \_\_\_\_\_  
Phone \_\_\_\_\_  
Email \_\_\_\_\_

### Local Agent

Name \_\_\_\_\_  
Firm \_\_\_\_\_  
Address \_\_\_\_\_  
City, State, Zip \_\_\_\_\_  
Phone \_\_\_\_\_  
Email \_\_\_\_\_

### Attorney

Name \_\_\_\_\_  
Firm \_\_\_\_\_  
Address \_\_\_\_\_  
City, State, Zip \_\_\_\_\_  
Phone \_\_\_\_\_  
Email \_\_\_\_\_

### Land Surveyor

Name \_\_\_\_\_  
Firm \_\_\_\_\_  
Address \_\_\_\_\_  
City, State, Zip \_\_\_\_\_  
Phone \_\_\_\_\_  
Email \_\_\_\_\_

### Engineer

Name \_\_\_\_\_  
Firm \_\_\_\_\_  
Address \_\_\_\_\_  
City, State, Zip \_\_\_\_\_  
Phone \_\_\_\_\_  
Email \_\_\_\_\_

### Architect

Name \_\_\_\_\_  
Firm \_\_\_\_\_  
Address \_\_\_\_\_  
City, State, Zip \_\_\_\_\_  
Phone \_\_\_\_\_  
Email \_\_\_\_\_

## 5. Legal Description of Property

*Please include the complete description as set forth in a deed, mortgage, or other similar legal document.*

*If additional room is needed please attach a separate sheet titled "Legal Description of Property".*

## 6. Applicant Signature

*By signing this petition, you are certifying that you have read this application, have provided the necessary documentation as listed within Chapter 195, Article III Section 195-19 of the City of Lexington Municipal Code.*

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**Applicant Signature**

**Date**

# Preliminary Plat Application

If the applicant is not the owner of the property, please have the owner(s) agent sign the appropriate Section and have the signature(s) notarized to authorize said applicant to process the application.

### Section I. Owner(s) are Individual(s)

The undersigned hereby states that she/he/they is/are the Owner(s) of the property that is the subject of the foregoing Application for a Preliminary Plat, that she/he/they hereby Authorize(s) \_\_\_\_\_

To act as her/his/their Agent with regards to the processing Of said application for the purposes set forth herein.

\_\_\_\_\_  
First Owner's Full Name (printed or typed)

\_\_\_\_\_  
First Owner's Signature

\_\_\_\_\_  
Second Owner's Full Name (printed or typed)

\_\_\_\_\_  
Second Owner's Signature

If additional names, please provide the names and signatures on an Attachment.

### Section II Owner is a Partnership

The undersigned hereby states that the Partnership of \_\_\_\_\_ Is the Owner of the property that is the subject of the foregoing application for a Preliminary Plat, that she/he is one of the Partners of said Partnership, that she/he has read said application, and that She/he hereby authorizes \_\_\_\_\_ to act as The Partnership's Agent in processing said application for For the purposes set forth herein.

\_\_\_\_\_  
Partner's Full Name (printed or typed)

\_\_\_\_\_  
Partner's Signature

### Section V. Notary

STATE OF \_\_\_\_\_ )  
 ) ss.  
COUNTY OF \_\_\_\_\_ )

I, the undersigned, A Notary Public, in and for said County, in the State aforesaid, DO HEREBY CERTIFY THAT \_\_\_\_\_ Is/are personally known to me, that said person(s) appeared before me this day in person and severally acknowledged that she/he/they signed and delivered the forgoing Owner Authorization Form as her/his/their free and voluntary act for the uses and purposes therein set forth.

Given under my hand and Notarial Seal this \_\_\_\_ day of \_\_\_\_\_, 2011.

\_\_\_\_\_  
Notary Public

### Section III. Owner is a Corporation

The undersigned hereby states that \_\_\_\_\_ is a Corporation duly incorporated in the state of \_\_\_\_\_ and that said is the Owner of the property that is the subject of the foregoing Preliminary Plat. The undersigned states further that she/he has read said application, She/he is the, \_\_\_\_\_ of said Corporation, is an Authorized Agent of said Corporation in processing said Application for the purposes set forth therein.

\_\_\_\_\_  
Full Name of Agent (printed or typed)

\_\_\_\_\_  
Signature of Agent

### Section IV. Owner is a Trust

The undersigned hereby states that \_\_\_\_\_ is a Trust duly created in the state of \_\_\_\_\_ and that said Trust is the Owner of the property that is the subject of the foregoing application for a Preliminary Plat. The undersigned states further that she/he is the Trustee of said Trust and that the attached individuals or entities are the Beneficial Owners of said Trust. The undersigned states further that she/he has read said application and and that the Beneficiaries of said Trust have authorized her/him to authorize \_\_\_\_\_ to act as said Trust's Agent in processing said application for the purposes set forth therein.

\_\_\_\_\_  
Full Name of Trustee (printed or typed)

\_\_\_\_\_  
Signature of Trustee

