

Lynden Township Preliminary Plat Application

Date: _____

1. Name of Subdivision: _____

2. Name of Applicant: _____ Phone: _____

Address: _____
(Street no. and name) (City) (State) (Zip)

3. Owner(s) of Record: _____ Phone: _____

Address: _____
(Street no. and name) (City) (State) (Zip)

4. Land Surveyor: _____ Phone: _____

Address: _____
(Street no. and name) (City) (State) (Zip)

5. Engineer: _____ Phone: _____

Address: _____
(Street no. and name) (City) (State) (Zip)

6. Subdivision Location: _____
(Direction) (Street)

7. Postal Delivery Area: _____ School District: _____

8. Total Acreage: _____ Zone: _____ Proposed Number of Lots: _____

9. Date of sketch plan approval: _____

10. Have any changes been made since the sketch plan was last before the Board: _____

If so, describe: _____

(Attach additional sheets as necessary.)

11. Name of the person you met with at Stearns County Environmental Services: _____ Date of Meeting: _____

12. List all contiguous parcels of land under same ownership and/or with an ownership interest:

Section(s): _____
Lot(s): _____

13. Include ten (10) copies of proposed preliminary plat.

I, _____, hereby certify that all of the above statements and the statements contained in the papers submitted herewith are true, and I agree to pay for **all** costs incurred in the subdivision of this land, including township engineering, legal, planning, and meeting costs. (All owners of record must sign on next line for application to be processed.)

Mailing Address: _____
(Street)

Application Received
(Signature Does Not Constitute Approval)