# PLAT AMENDMENT APPLICATION PACKET



Milford City PO Box 69 26 South 100 West Milford, UT 84751 (435) 387-2711 Fax (435) 387-2748



#### Dear Applicant,

This application packet has been developed as a means to assist you, the applicant, in understanding the application procedure and requirements when requesting a <u>Plat Amendment</u>. This packet includes all the necessary background information you will need to prepare and file a complete submittal that will allow your application to be processed and reviewed in the timeliest manner possible. The following materials have been included in this application packet for your convenience:

- Plat Amendment Application Form
- Affidavit Form
- Plat Amendment Application Checklist
- Final Plat Application Checklist
- Final Plat Application
- Plat Amendment Application Review Process Chart
- Milford City Ordinance 14.02 Subdivision Code

Incomplete Applications will not be accepted, receipted, or processed. In order to adequately process your subdivision request, the following materials will be required at the time of submission of your application:

- Completed Plat Amendment Application Form
- Signed & Notarized Affidavit Form
- All items listed on the Plat Amendment (incomplete application will not be accepted).
- Application & Processing Fee \$100.00
- · Other supporting materials as applicable.

Should you have any further questions regarding the application materials, process, or laws and ordinances governing subdivision petitions, please feel free to contact the city office. Thank you for your interest in Milford City, and we look forward to working with you very soon.

Sincerely,

Milford City

## **Milford City**

# Form 83 Plat Amendment Application

26 South 100 West, Milford, UT 84751 (435) 387-2711 www.milfordut.com



Notice: The applicant must submit copies of the plat amendment plans to be reviewed by the City in accordance with the terms of the Milford City Municipal Code. Once a set of subdivision plans are submitted, the plans are subject to reviews by the various city departments and may be returned to the applicant for revision if the plans are found to be inconsistent with the requirements.

Application Date:				
Project Information:				
Project Name:				
Project Address:				
Zone:	Acres:			
Parcel # (s):		_		
Project Description:				
Name of Applicant				
Name of Applicant:				
Mailing Address:	Physical Address:			
Telephone:	Fax:			
Mobile Phone:	Email Address:			
Name of Property Owner(s):				
Mailing Address:	Physical Address:			
Telephone:	_ Fax:			
Mobile Phone:	_ Email Address:	Address:		
Name of Property Owner(s):				
Mailing Address:				
Telephone:	_ Fax:			
Mobile Phone:	_ Email Address:			
FOR CITY USE ONLY				
Date Received: Date Fi	ing Fee Paid:	Check #:		
Receipt #: Approve	al Date:	Deny Date:		

# PROPERTY OWNER AFFIDAVIT STATE OF \_\_\_\_\_ COUNTY OF \_\_\_\_\_, being duly sworn, depose and say that I (we) am (are) I (we),\_\_ the owners(s) of the property identified in the attached application and that the statements herein contained and the information provided in the attached plans and other exhibits are in all respects true and correct to the best of my (our) knowledge. I also acknowledge that I (we) have received written instruction regarding the process for which I (we) am (are) applying and the Milford City Staff have indicated they are available to assist me in making this application. DATED this \_\_\_\_\_\_ day of \_\_\_\_\_\_ 20\_\_\_\_. Property Owner Signature Property Owner Signature Subscribed and sworn/affirmed to before me this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_. Notary Public My Commission Expires:\_\_\_\_\_ AGENT AUTHORIZATION AFFIDAVIT STATE OF \_\_\_\_\_\_ § COUNTY OF \_\_\_\_ , the owner(s) of the real property described in the attached application, do authorize as my (our) agent(s), \_\_\_\_\_\_\_, to represent me (us) regarding the attached application and to appear on my (our) behalf before any administrative or legislative body in the City considering this application and to act in all respect as our agent in matters pertaining to the attached application. DATED this \_\_\_\_\_\_ day of \_\_\_\_\_\_ 20\_\_\_\_.

Subscribed and sworn/affirmed to before me this

Proper	ty Owner Signature	
Proper	ty Owner Signature	
this	day of	, 20
		Notary Public
	My Commission Ex	xpires:

#### PLAT AMENDMENT APPLICATION CHECKLIST

Incomplete applications will not be accepted and will be returned to the applicant.

All required items shall be submitted with the application.

#### **Submission Requirements**

- ✓ Application Filing Fee of \$100.00
- ✓ Noticing Fee –includes fee for signs, paper, envelopes, postage & newspaper fees. (Milford City will send an invoice to the applicant)
- ✓ Completed Application Form
- ✓ Copy of the current plat map. Contact the Beaver County Recorder's Office at 435.438.6484
  for this information
- ✓ A list of all owners of property located within 400 feet of the exterior boundaries of the subject property; the list shall be keyed to a map showing the location of these properties. Contact the Beaver County Recorders Office at 435-438-6484 for this information
- √ 4 sets of full size plans

#### Cover Sheet

- Name of Subdivision
- Location by section, township and range
- Date of preparation

#### Vicinity Map

- North arrow & name of subdivision
- Significant natural and manmade features or existing structures on the site & within 200' or any portion of it
- Name of adjacent property owners
- Topographic contours at no greater interval than 2'

#### Plat Amendment Plan

- Drawn at a scale no smaller than 1"=100"
- North arrow & name of subdivision
- Location and dimensions of all utility easements
- A proposed layout of amended area
- Availability & location of utilities & drainage facilities within the vicinity which are adjacent to the property or on the property
- The layout, names, & widths of existing & future road right of ways adjacent to the amended area
- The total acreage of the entire tract proposed for plat amendment, & the size of each lot
- A tie to a permanent survey monument at a section corner
- The boundary lines of the subdivision with bearings & distances
- The layout & dimensions of proposed lots with lot area in square feet

#### County Sidwell Plat Map

 Subject property outlined in red (with underlay aerial if available). Plat maps may be obtained at the Beaver County Recorder's Office

#### o Grading & Drainage Plan

- Drawn to a scale no smaller than 1'=100'
- Road and lot layout
- Topographic contours at no greater internal than 2'
- Areas of substantial earth moving with an erosion control plan
- Location of any 100 year flood plain as designated by the Federal Emergency Management Agency (FEMA)
- A storm drainage plan showing water flow directions, inlets outlets, catch basins, waterways, culverts, detention basins, orifice plates, outlets to offsite facilities & off site drainage facilities planned to accommodate project drainage
- Location of existing water courses, canals, ditches, springs, wells, culverts, & storm drains
- Any existing wetlands

#### Utility Plan

- Drawn to scale no smaller than 1"=100"
- North arrow & name of subdivision
- Road and lot layout

- All existing & proposed utilities including: sewer, culinary water, fire hydrants, storm drains, subsurface drains, gas lines, power lines & street lights
- Location & dimensions of all utility easements
- 4 sets of plans reduces to 11" x 17"

#### Other Documents to be Provided by the Subdivider

- √ 3 copies of new Soils Report
  - o Required for subdivision more than 2 years old
  - o Prepared, stamped & signed by a qualified engineer no photocopies
- ✓ Proof of ownership of the development parcel(s)
- ✓ Certificate of land surveyor, engineer and site planner
- ✓ Hydraulic and hydrologic storm drainage calculations
- ✓ A plan showing the locations of prominent natural features such as rock outcroppings, woodlands, steep slopes-potential natural hazards (if applicable)
- ✓ A traffic report when required by the City
- ✓ Preliminary Title Report
- ✓ Service agreements from all utility companies
- ✓ Any necessary agreements with adjacent property owners regarding storm drainage or other matters pertinent to subdivision approval
- ✓ The subdivider shall comply with all applicable federal, state, & local laws & regulations, & shall provide evidence of such compliance if requested by the City

# If the Plat Amendment is approved by the City Council then you as the applicant must complete the Final Plat Checklist.

#### FINAL PLAT CHECKLIST

- ✓ Application Filing Fee \$200.00
- ✓ Complete Application Form
- ✓ 4 sets of full size plans including the following minimum information:
  - o All items contained in the Plat Amendment
    - Including lot numbers
    - Landscaping plan for any public or common areas
    - Proposed street lighting
    - Proposed on-site and off-site water facilities, sanitary sewers, storm drain facilities and fire hydrants
    - Vegetation preservation and protection plan, including trees and other vegetation proposed to be planted
- ✓ Restrictive covenants
- ✓ The legal certifications by the proper local officials (usually the chief elected official and the Planning and Zoning Commission chairman)
- ✓ Statement of dedication, dedicating all streets for public use that are not private streets
- ✓ Legal certification attested by city recorder
- ✓ Owner's Certificate of Dedication
- ✓ Proposed zoning changes, if any
- ✓ Proposed or required fencing (location, height and material)

### **Milford City**

### Form 82 Final Plat Application



26 South 100 West, Milford, UT 84751 (435) 387-2711 www.milfordut.com

Notice: The applicant must submit copies of the final plat plans to be reviewed by the City in accordance with the terms of the Milford City Municipal Code. Once a set of subdivision plans are submitted, the plans are subject to reviews by the various city departments and may be returned to the applicant for revision if the plans are found to be inconsistent with the requirements.

Application Date:				
Project Information:				
Project Name:				
Project Address:				
Zone:	Acres:			
Parcel # (s):				
Project Description:				
Name of Applicant:				
NA '11' A L L				
Telephone:	elephone: Fax:			
Mobile Phone:	Nobile Phone: Email Address:			
Name of Property Owner(s):				
Mailing Address:				
Telephone:				
lobile Phone: Email Address:				
Name of Property Owner(s):				
Mailing Address:	Physical Address:			
Telephone:	Fax:			
Mobile Phone: Email Address:				
FOR CITY USE ONLY				
Date Received:	Date Filing Fee Paid:	Check #:		
Receipt #:	Approval Date:	Deny Date:		

#### PLAT AMENDMENT REVIEW PROCESS

