



city

of

CREVE COEUR

PLANNING DIVISION

File # _____

300 North New Ballas Road Creve Coeur, Missouri 63141
Tel. (314) 872-2501 • Fax (314) 872-2505

PLANNING AND ZONING COMMISSION

APPLICATION FOR SUBDIVISION PLAT

Title of Project: _____

Location of Project: _____

Locator # _____

Please attach a copy of a metes and bounds legal description of the area to be subdivided.

<p>Applicant:</p> <p>_____ Name</p> <p>_____ Company (If Applicable)</p> <p>_____ Address</p> <p>_____ Address</p> <p>_____ Telephone #</p> <p>_____ Fax #</p> <p>_____ Email:</p>	<p>Applicant's Representative (if applicable):</p> <p>_____ Name</p> <p>_____ Company (If Applicable)</p> <p>_____ Address</p> <p>_____ Address</p> <p>_____ Telephone #</p> <p>_____ Fax #</p> <p>_____ Email:</p>
---	--

APPLICANT:

Architect ____ Engineer ____ Surveyor ____ Agent ____ Owner ____

The undersigned hereby requests to be placed on the Agenda for the Planning and Zoning Commission meeting at 6:30 P.M. on Monday, _____, 20__.

<u>SUBMITTAL CHECKLIST</u>	
_____	P&Z Agenda Application
_____	Fees Paid
_____	Draft Preliminary Plat
_____	Landscape Plan
_____	Tree Preservation Plan
_____	Digital copy of all documents

Signature _____

Title _____

Date _____