## City of Ottawa Community Development Department 101 S. Hickory, P.O. Box 60 Ottawa, KS 66067

Phone (785) 229-3620 Fax (785) 229-3625 www.ottawaks.gov

## **Preliminary Plat Application**

Date submitted	d:		
Application Fe	e: \$150.00 plus	s \$5.00 for every lot.	
Name of Subdi	ivision:		
Name of Applic	cant:		
Address:			
			E-Mail:
Names of Loca	al Agent:		
Address:	_		
			E-Mail:
Owner of Reco	ord:		
Address:			
			E-Mail:
Surveyor:			
Phone:		Fax:	E-Mail:
Proof of Owne	rship:		
		(Copy of Deed – Contract fo	r Purchase)
Subdivision Lo	ocation:		
Total Acreage:		Zoning:	Number of Lots:
Legal descript	ion:		
Owner/Applicant/Agent signature			Date
	Submittals	Number of Copies	
	1 <sup>st</sup>	21 – 24 X 36	
	2 <sup>nd</sup>	7 – 24 X 36	

4 - 24 X 36 and 19 - 11 X 17

Final