

# VERSAILES-MIDWAY-WOODFORD COUNTY PLANNING COMMISSION

## APPLICATION FOR SUBDIVISION PLAT (MINOR)



Application Filing Date: \_\_\_\_\_ Preliminary Approval Date: \_\_\_\_\_  
Technical Review Date: \_\_\_\_\_ Final Approval Date: \_\_\_\_\_

### APPLICANT(S) INFORMATION

1) APPLICANT(S) NAME(S): \_\_\_\_\_

Names of Officers, Directors, Shareholders or Members (If Applicable):

Mailing Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
\_\_\_\_\_ Cell Number: \_\_\_\_\_  
\_\_\_\_\_ E-Mail Address: \_\_\_\_\_

2) PROPERTY OWNER(S) NAME(S): \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_  
\_\_\_\_\_ Cell Number: \_\_\_\_\_  
\_\_\_\_\_ E-Mail Address: \_\_\_\_\_

**\*PLEASE USE ADDITIONAL PAGES IF NEEDED\***

3) SURVEYOR: \_\_\_\_\_ Name of Firm: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Cell Number: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

4) ENGINEER: \_\_\_\_\_ Name of Firm: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Cell Number: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

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**PROPERTY INFORMATION**

Property Address: \_\_\_\_\_  
PVA Parcel Number: \_\_\_\_\_  
Lot Acreage: \_\_\_\_\_  
Current Zoning: \_\_\_\_\_

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**APPLICATION CHECKLIST**

- A completed and signed Application
- Agency Signature(s), if required by Subdivision Regulations
- Proposed Lot Layout prepared by a licensed surveyor or engineer depicting the various portion(s) of the property to be included in the proposed Subdivision Plat (Please include: two (2) - 18" x 24" and two (2) - 11" x 17" preliminary plat sets)
- Topographic Survey, if required
- Any proposed Plat Restrictions, Property or Condominium Owners Association Covenants, Master Deed or Restrictions, if applicable
- Filing and Recording Fees

**APPLICANT'S CERTIFICATION**

*I do hereby certify that, to the best of my knowledge and belief, all application materials have been submitted and that the information they contain is true and correct. Please attach additional signature pages if needed.*

Signature of Applicant(s) and Property Owner(s):

1) \_\_\_\_\_  
\_\_\_\_\_  
*(please print name and title)* Date: \_\_\_\_\_

2) \_\_\_\_\_  
\_\_\_\_\_  
*(please print name and title)* Date: \_\_\_\_\_

*The foregoing signatures constitute all of the owners of the affected property necessary to convey fee title, their attorney, or their legally constituted attorney-in-fact. If the signature is of an attorney, then such signature is certification that the attorney represents each and every owner of the affected property. Please use additional signature pages, if needed.*

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**REQUIRED FILING FEES MUST BE PAID BEFORE ANY APPLICATION WILL BE ACCEPTED**

Application Fee: \_\_\_\_\_ Submit Application to:  
Land Use/Recording Fee: \_\_\_\_\_ Versailles-Midway-Woodford County Planning Commission  
Date Fees Received: \_\_\_\_\_ 103 South Main Street, Suite 204 Versailles, KY 40383  
859.873.8611 [www.woodfordplanning.org](http://www.woodfordplanning.org)