Print Form

Benton County Planning Department

Planning Annex, P.O. Box 910, 1002 Dudley Avenue, Prosser WA 99350, Phone: (509) 786-5612 or (509) 736-3086, Fax (509) 786-5629

BENTON COUNTY APPLICATION FOR FINAL PLAT

1. Name of Plat _____

   File No. _____

2. Name and Address of applicant

   Telephone

   If you wish to be contacted via email please list your email address: _____

3. Name and Address of property owner

   Telephone

4. Name and Address of Surveyor

   Telephone

5. Name and Address of Engineer:

   Telephone

6. Parcel No. or Legal description of property included in the final plat

7. The applicant shall submit **ten (10) copies** of the final plat for review.

8. Land Use Information:

Total area involved	_____	Acreage in parks	_____
Total Number of lots	_____	Length of public streets	_____
Smallest lot area	_____	Total acreage of public streets	_____
Average lot area	_____		

I certify that the information given above is true and complete.

Signature Block for individuals only.

Applicant's Signature	Print Name	Date
Signature of Legal Owners	Print Name	Date
Signature of Person with additional ownership interest	Print Name	Date

All persons with an ownership interest in the property on which the land use action is proposed must sign the application.

If the applicant is a corporation/partnership/LLC etc. please use the following signature block.

Applicant:_____

By:_____,_____
(print name) (Title)

Signature:_____,_____
(Signature) (Title)

The above signed officer of _____ (name of entity) warrants and represents that all necessary legal and corporate actions have been duly undertaken to permit _____to submit this application and that the above signed officer has been duly authorized and instructed to execute this application.

Any information submitted to the Benton County Planning Department is subject to public records disclosure law for the State of Washington (RCW Chapter 42.17) and all other applicable law that may require the release of the documents to the public.

THERE IS A $250.00 NON REFUNDABLE APPLICATION FEE FOR A FINAL SUBDIVISION PAYABLE AT THE TIME OF SUBMITTAL. MAKE CHECKS PAYABLE TO THE BENTON COUNTY TREASURER.

FOR OFFICIAL USE ONLY:

Critical Area Review Completed by_____ on _____.

Application approved for processing by _____ on _____.

Zoning _____ Comp Plan _____.