

NAME OF PROJECT.

CENTERVILLE CITY

SMALL SUBDIVISION WAIVER/LOT SPLIT APPLICATION

655 North 1250 West • Centerville, Utah 84014 Phone 801-292-8232 Fax 801-292-8251

PROJECT ADDRESS						
ZONING	IING PARCEL #(S)					ACREAGE
PROPOSED USE OF PROPERTY						
APPLICANT / AGENT INFORMATION						
NAMECOMPANY NAME						
MAILING ADDRESS				CITY / ST / ZIP		
PHONE	E FAX			EMAIL		
SIGNATURE OF APPLICANT/AGENT						See Note 1 DATE
PROPERTY OWNER INFORMATION (1)						
NAME				ompany name _		
MAILING ADDRESS				ITY / ST / ZIP _		
PHONE			FAX	EMAIL _		
SIGNATURE OF PROPERTY OWNER						See Note 1 DATE
PROPERTY OWNER INFORMATION (2)						
NAME COMPANY NAME						
MAILING ADDRESS CITY / S						
PHONE FAX EMAIL						
SIGNATURE OF PROPERTY OWNERSee Note 1 DATE						
FEE AND DEPOSIT MUST ACCOMPANY THIS APPLICATION – SEE ATTACHED FEE SCHEDULE						
Date Rec'd	THE DEF	Rec'd / Initials	O ACCOMINICIONIS	Assigned Project Name		CLL AT TACHED I LE SCHEDOLE
Fee/Deposit Attached	Y or N	Amount Fee Paid	\$ 250.00 / \$ 400.00	Amount of Deposit Paid	\$	250.00 / \$500.00 Check #:

Note 1: Deposits will be applied toward the cost of required engineering and/or legal services invoiced to the City. Developer/Applicant will be refunded or billed any difference without markup. Hourly rates for these services will be provided upon request. Also any errors or corrections needed for submitted

plans are the responsibility of the developer/applicant.
Initial here for acknowledgement of deposits