

Lynden Township Final Plat Application

Date: _____

1. Name of Subdivision: _____

2. Name of Applicant(s): _____ Phone: _____

Address: _____
(Street no. and name) (City) (State) (Zip)

3. Owner(s) of Record: _____ Phone: _____

Address: _____
(Street no. and name) (City) (State) (Zip)

4. Subdivision Location: _____
(Direction) (Street)

5. Total Acreage: _____ Zone: _____ Proposed Number of Lots: _____

6. Have any changes been made since the proposed plat was last before the Board: _____

If so, describe: _____

(Attach additional sheets as necessary.)

I hereby apply for the above consideration and declare that the information and materials submitted with this application are in compliance with Stearns County and Lynden Township Ordinances and Requirements and are complete and accurate to the best of my knowledge.

I agree to post a financial guarantee in the amount of _____ with Lynden Township to fund any improvements not properly completed by the developer. I understand and agree that all Township incurred professional fees and expenses associated with the processing of this request are the responsibility of the property owner and shall be promptly paid by the property owner upon billing by the Township. I agree to pay all current expenses in advance of the processing of this application. I further agree to post \$_____ in the Township's escrow account to pay for additionally expenses incurred in association with the execution of this document and said development. Upon completion of all improvements, any unspent dollars will be returned to the Developer.

PLEASE NOTE THAT THIS APPLICATION MUST BE SIGNED BY THE APPLICANT(S) AND 100% OF THE PROPERTY OWNERS OF THE PROPERTY SUBJECT TO THE APPLICATION.

Signature(s) of Owner(s): _____ **Date:** _____

_____ **Date:** _____

_____ **Date:** _____

_____ **Date:** _____

Signature(s) of Applicant(s): _____ **Date:** _____

_____ **Date:** _____

Application Received (Signature Does Not Constitute Approval)

Township Authorized Signature Date