City of Greenland, Arkansas Lot Split Application

The following items must be turned in to the City of Greenland City Hall on or before the 5th day of the month prior to the Planning Commission meeting at which the request is to be considered. If the 5th falls on a Saturday, the deadline is Friday the 4th. If the 5th falls on a Sunday, the deadline is Friday the 3rd. If the 5th falls on a holiday on a Monday, the deadline is Friday the 2nd. If the 5th falls on a holiday on a Wednesday, the deadline is Tuesday the 4th, etc. Incomplete applications will not be included on the agenda.

- 1. Pay review fee: Lot Split: \$250
- 2. Submit a completed Lot Split Application (attached).
- 3. Submit one (1) copy of the drawings to City Hall. Email one pdf copy of the drawings to Carole Jones, PE at cdjonespe@gmail.com on or before the submittal date. Only drawings with complete information as outlined below will be accepted:
 - Lot split requests must include a survey with a legal description of the beginning lot and the legal description of the proposed resultant lots including the address and directions to the property.
 - The survey must show dimensions of the proposed lots created and must include all rights-of-way and easements required for utilities and drainage.
 - The survey must show the existing zoning of the property and all building setbacks.
- 4. Applicant will also make sure the lot split request meets the requirements of the city code.
- 5. City engineer will review the application and drawings and coordinate with City Hall on the newspaper advertisement and sign posting once a completed application has been confirmed.
- 6. City engineer will coordinate with utilities. City engineer and utilities will provide written responses to the applicant on or before the 15th of the month. Any revisions must be resubmitted electronically to the engineer on or before the 18th of the month. Applicant will also be required to submit seven (7) full size FOLDED copies of the drawings to City Hall on or before the 18th of the month or when the re-submittal is made.

<u>Please note:</u> All applicants are strongly encouraged to meet with the Planning Commission to discuss the proposed lot split <u>PRIOR</u> to submitting an application.

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Please fill out this form completely, supplying all necessary information and documentation to support your request. Your application will not be placed on the Planning Commission agenda until this information is furnished. Completed applications and payment of fees must be submitted to City Hall by the 5th day of the month prior to the Planning Commission meeting at which the request is to be considered.

NAME OF DEVELOPMENT / PROJECT:	
APPLICANT NAME:	
Address:	
Email:	
Phone:	
Fax:	
REPRESENTATIVE:	
Address:	
Email:	
Phone:	
Fax:	
Indicate preferred contact person for this request: Applicant	Representative
PROPERTY OWNER:	
Address:	
Email:	
Phone:	
Fax:	
PROPERTY INFORMATION	
Site Address / Location:	
Current Zoning District:	
Proposed Land Use:	
Assessor's Parcel Number(s) for Property:	
Total Acreage: Total Number of Lots Proposed	
	Floodplain Type:
	(A, AE, etc.)

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UTILITY INFORMATION

Check the applicable box if utility provider.	is located on or fronting the subject property and list the name of the
Gas Provider:	Electricity Provider:
Water Provider:	Sewer Provider:
Cable TV Provider:	Telephone Provider:
ROAD INFORMATION	
U.S., State, or County Road nun	nber providing access to property:
Road surface (asphalt, gravel, u	nimproved, etc.):
Right of way width:	
answers herein made and all da best of my knowledge and belief information is grounds for invalic	VE: I certify under penalty of perjury that the foregoing statements and ta, information, and evidence herewith submitted are in all respects, to the fixture and correct. I understand that submittal of incorrect of false lation of application completeness, determination, or approvals. I nland may not approve the application or may set conditions of approval.
Name (Printed):	Date:
Signature:	
the owner(s) of the property that and consent to its filing. (If signe	HORIZED AGENT: I/we certify under penalty of perjury that I am/we are is the subject of this application and that I/we have read this application d by the authorized agent, a letter from each property owner must be it is authorized to act on her/his behalf.) Address:
, ,	Address.
Date:	Phone:
**************************************	**************************
Fee Paid (\$250):	
Date Application Submitted:	Date Accepted as Complete:
Project Number:	
Public Hearing Date:	