

LOT SPLIT

CHECKLIST OF REQUIRED APPLICATION MATERIALS

- X Application form
- X Two (2) copies of property drawing or survey
- X Two (2) copies of utility drawing
- X Filing fee

PDF file of Lot split sent to: cholloway@wichita.gov

CASE NO. _____

**WICHITA-SEDGWICK COUNTY
METROPOLITAN AREA PLANNING DEPARTMENT**

This form must be completed and filed with the Planning Department, City Hall - 10th Floor; 455 N. Main Street, Wichita, Kansas, 67202-1688, in accordance with directions on the accompanying instruction sheet.

AN INCOMPLETE APPLICATION CANNOT BE ACCEPTED

SUBDIVISION NAME: _____

ASSOCIATED CASE NO. (IF APPLICABLE): _____

Sketch Preliminary Final One-Step Final
Final Portion of Overall Preliminary Revision to Preliminary Revision to Final Replat

PROPERTY LOCATION: City County County (Three-Mile Ring)

LOT SPLIT: Lot(s) _____, Block(s) _____, Addition _____

1. The names of the owners of all property included in this application must be listed.

A. PROPERTY OWNER(S): _____

Address: _____ Zip Code: _____ Phone: _____

AGENT: _____

Address: _____ Zip Code: _____ Phone: _____

B. PROPERTY OWNER(S): _____

Address: _____ Zip Code: _____ Phone: _____

AGENT: _____

Address: _____ Zip Code: _____ Phone: _____

C. SURVEYOR: _____

Address: _____ Zip Code: _____ Phone: _____

2. The property is generally located (relation to nearest arterial streets): _____

3. Tax Control No(s): _____

4. General Information

A. Gross Size of Plat/Lot: _____

B. Lots

Number of Residential Lots: _____ Number of Commercial Lots: _____ Number of Industrial Lots: _____

Total Number of Lots Being Platted: _____

Total Number of Lots Created by Lot Split: _____

(FOR OFFICE USE ONLY)

MAP NO. _____ SEC. _____ TWP. _____ RANGE _____ DISTRICT _____ S/D. COMM. _____ MAPC _____

C. Minimum Lot Frontage: _____

Minimum Area: _____

D. Existing Zoning: _____ Proposed Zoning: _____

E. Facilities:

1. Water Supply

Existing Facilities

Proposed Facilities

- Municipal Water
- Rural Water
- Community Well
- Individual Well

2. Sewage Disposal

- Municipal Sewer
- Sewage Lagoon
- Alternative Sewer
- Septic System

3. Sidewalks

F. New Streets: _____ R/W _____ Ft. _____ R/W _____ Ft.

_____ R/W _____ Ft. _____ R/W _____ Ft.

_____ R/W _____ Ft. _____ R/W _____ Ft.

Total Feet: _____

The owner(s) herein agree(s) to comply with the Subdivision Regulations for the Wichita-Sedgwick County Metropolitan Area, as approved, and all other pertinent Ordinances of the City of Wichita and/or Resolutions of Sedgwick County, Kansas, and statutes of the State of Kansas. I/We further agree to waive the 60-day statutory period in which the Planning Commission or Governing Body must act. In addition, it is agreed that all costs of recording the plat and supplemental documents thereto, with Resolutions approving any petition for improvements, such as streets, sewers, sidewalks, etc., shall be assumed and paid for by the owner(s) when billed. The undersigned further states that I am/we are the owner(s) of the property proposed for platting.

APPLICANT'S SIGNATURE

By: _____
AUTHORIZED AGENT (IF ANY)

APPLICANT'S SIGNATURE

By: _____
AUTHORIZED AGENT (IF ANY)

NOTE: The petition must bear the signature of the property owner(s). If an authorized agent signs in the owner's behalf, the agent shall sign his/her own name and attach the owner's written notarized authorization to this application.

(FOR OFFICE USE ONLY)

RECEIVED BY: _____ DATE: _____ TIME: _____ FEE: _____