

**SUBDIVISION APPLICATION**  
**Keith County Planning and Zoning Department**  
**511 North Spruce St Room 209, Ogallala NE 69153**  
**308-284-3356 Fax: 308-84-3508**

This is an application for (X one):

\_\_\_\_\_ Preliminary Plat Review

\_\_\_\_\_ Final Plat

\_\_\_\_\_ Re-plat Review

\_\_\_\_\_ Minor Subdivision Review

\_\_\_\_\_ Administrative Plat Review

Please refer to the Keith County Zoning Regulations for additional submittal information required along with this application.

I (we) the undersigned hereby request a review before the Keith County Planning Commission concerning a proposed property action within the unincorporated area of Keith County.

Legal Description (with parcel no.) as obtained from the Keith County Assessor's Office:

\_\_\_\_\_  
Please attach the sheet to this application if necessary.

Name of proposed subdivision: \_\_\_\_\_

Current Zoning: \_\_\_\_\_

Total number of acres: \_\_\_\_\_ Number of proposed lots: \_\_\_\_\_

Average lot size: \_\_\_\_\_ Minimum lot size: \_\_\_\_\_

Owners of the area proposed for subdividing (please see the Keith County Zoning Regulations regarding requirements for certified (notarized) statements from all owners of the property that the intent and action described herein is agreed upon.

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Cell: \_\_\_\_\_

\_\_\_\_\_  
Signature of owner or authorized agent

\_\_\_\_\_  
Date

Office Use Only:

Date application received: \_\_\_\_\_

Fee paid: \_\_\_\_\_

Application accepted by: \_\_\_\_\_

Application number assigned: \_\_\_\_\_