

APPLICATION FOR LAND SUBDIVISION (PLAT)

DATE RECEIVED: 4-23-2020CHECK ONE: Preliminary Plat Final Plat Replat Amended Cancellation 1. PROPOSED SUBDIVISION NAME: SUB. PT P. VENABLES A-1010 UNIT NO. _____LOCATION DESCRIPTION/NEAREST COUNTY ROAD X SH 154 + CR 1442ACREAGE 12.99 NO. OF LOTS: EXISTING _____ PROPOSED 5REASON(S) FOR PLATTING/REPLATTING PARTITION2. OWNER/APPLICANT*: LOYD STEVENS LEIGHTON STEVENS

(*If applicant is person other than owner, a letter of authorization must be provided from owner)

ADDRESS: P.O. Box 2129, Sulphur Springs, TX 75483TELEPHONE: 903-440-1767 FAX: _____ MOBILE: 903-440-1767EMAIL: LEIGHTON STEVENS @ MAC.COM3. LICENSED ENGINEER/SURVEYOR: JUSTIN KLEAM RLS 5871 BY-LINE SURMAILING ADDRESS: 109 PROSPERITY EMORY, TX 75440TELEPHONE: _____ FAX: _____ MOBILE: 903-474-3132EMAIL ADDRESS: JKLEAM @ BYLINESURVEYING.COM

4. LIST ANY VARIANCES REQUESTED: _____

REASON FOR REQUEST (LIST ANY HARDSHIPS): _____

5. PRESENT USE OF THE PROPERTY: _____

INTENDED USE OF LOTS: (CHECK ALL THOSE THAT APPLY)

_____ RESIDENTIAL (SINGLE FAMILY) _____ RESIDENTIAL (MULTI-FAMILY)

_____ OTHER (SPECIFY) _____

6. PROPERTY LOCATED WITHIN CITY ETJ: _____ YES _____ NO

If yes, Name of City: _____

7. IS ANY PART OF THE PROPERTY IN A FLOODPLAIN? _____ YES _____ NOWATER SUPPLY: MARTIN SPRINGS ELECTRIC SERVICE: ONCOZSEWAGE DISPOSAL: AEROBIC SEPTIC GAS SERVICE: N/A

8. Is the property subject to any liens, encumbrances, or judgments? If so, give details. (Provide separate sheet if needed) Permission from any lien holders and/or removal of any encumbrances or judgments will be necessary prior to filing of said plat with the County Clerk's Office.

9. See platting requirements. All necessary documents to reflect compliance must be complete before application will be deemed complete.

10. I agree to comply with all platting and subdivision requirements of Hopkins County, Texas. I understand that the plat will NOT be forwarded to the Commissioners' Court unless all documentation is satisfactorily filed with the County Clerk's Office correction due date.


 Signature of Owner/Applicant

LEIGHTON A. STEVENS CO-OWNER
 Print Name & Title

**If applicant is person other than owner, a letter of authorization must be provided from owner. Signature indicates authorization for plat application and acceptance of waiver statement.

DATE: 4-23-2020

Appendix B
SUBDIVISION PLATTING CHECKLIST
FIRST READING
(PRELIMINARY)

Name of Subdivision: Pt. P. VENABLES A-1010
 Contact Person: _____ Phone Number: _____

YES	NO	N/A	
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Name of proposed subdivision.
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Name and address of Sub-divider.
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Volume, page and reference names of adjoining owners.
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Volume, page and reference land use of adjoining owners.
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Master Development Plan (if subdivision is a portion of a larger Tract.
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Location map.
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Scale (not smaller than 1"=200'). <i>If parent tract is larger than 320 acres, scale may be 1"=1,000' w/proposed plat 1"=200'.</i>
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	North directional arrow.
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Contour information - rivers, creeks, bluffs, etc. (no greater than 2' intervals)
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Major topographic features.
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Total acreage in subdivision.
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Total number of lots in subdivision.
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Typical lot dimensions.
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Land use of lots, parks, greenbelts.
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Total length of roads.

PRELIMINARY CHECKLIST

YES	NO	N/A	
—	—	X	Width of right-of-way.
X	—	—	Special flood hazard areas/note.
—	—	X	Road maintenance (County/Home Owners Assn.).
—	—	X	Approval by TxDOT or County for driveway entrance(s).
—	—	X	Location of wells - water, gas, & oil, where applicable & unused capped statement.
—	—	—	Plat Filing Fees paid. (receipt from County Clerk required)
—	—	—	On-Site Sewage Facility Inspector's Approval
—	—	—	Acknowledgement of Rural Addressing / Signage.
—	—	—	Water Availability Study.
—	—	—	Tax Certificates and rollback receipts.

Signature of Reviewer

Date of Review

ADDITIONAL REQUIREMENTS:

ALL ITEMS ON THIS CHECKLIST MUST BE IN THE HANDS OF THE COUNTY CLERK'S OFFICE NO LESS THAN THIRTY (30) DAYS PRIOR TO THE COMMISSIONERS' COURT HEARING DATE.