

## CITY OF RALSTON, NEBRASKA ADMINISTRATIVE ADJUSTMENT APPLICATION

<u> </u>	\$230.00 \$15.00	Lot Splits	
Lot Consolidation	\$15.00	Lot Splits	\$15.00
Applicant's Name		Day Phone	
Applicant's Address		City, State, Zip	
Property Owner		Day Phone	
Property Owner Address		City, State, Zip	
Property Owner		Day Phone	
Property Owner Address		City, State, Zip	
If there are more than two property owners in	volved, attach a se	parate list of all owner's	names and addresses.
Project Address		City, State, Zip	
Legal Description			
Description of Existing Use			
Description of Proposed Use			
Does the property have access to a Sanitary Se			No
Do the Lots have frontage on a dedicated street right-of-way?			
Is there a companion split attached?		[ ] Yes [ ]	No
I, undersigned, fully understand I am responsit and that this approval has no effect on vacating		•	cupied utility easements
Signature of Property Owner or Applicant's Signature of Property Owner, the applicant certification of the owner, the applicant certification of the owner		to be the authorized age	Date nt of the owners(s).
Signature of Property Owner or Applicant's Signature of Property Owner, the applicant certification of the owner, the applicant certification of the owner of the owner.		to be the authorized age	Date nt of the owners(s).
For Office Use Only			
Fee Received: Date Subm	iitted:	Plat Page:	
Accepted By:	<i>Title:</i>		
Recommendation:			
Remarks:			_

The following items must appear on each	ch surveyor's certificate:	
Legal Description:		
(insert applicable legal description)		
	report was made by me or under my direct personal red land surveyor under the laws of the State of Nebraska.	
(Seal)		
	Signature of Land Surveyor Dated:	
	property as described in the surveyor's certificate and used said lot to be subdivided into lots as shown on this plat.	
Date	Signature of Owner	
Date	Signature of Owner	
Acknowledgement of Notary State of Nebraska )		
On this day of qualified and commissioned in and for	,, before me, a notary public, duly said county and state, personally appeared	
	the identical person(s) whose name(s) are affixed to the edged the signing if the same to be their voluntary act and	
Witness my hand and notarial seal in sa	aid county the date last aforesaid.	
(Seal)	Notary Public Commission Expires:	

County Treasurer's Certification	(seal required)
•	regular or special taxes due or delinquent against the property and as shown by the records of this office.
(Seal)	Signature of County Treasurer Date
City of Ralston Approval (seal re	equired)
= =	subdivision as per the City of Ralston Zoning Regulations. This ss this plat is filed and recorded with the County Register of Deeds e.
(Seal)	Signature of the City Administrator Date:
	Signature of the Planning Commission Chair Date: