

Application Fee \$500.00

PERMIT NO. \_\_\_\_\_

# CITY OF GAYLORD

## APPLICATION FOR PLAT OR RE-PLAT PERMITS

Street Location of Property \_\_\_\_\_

Legal Description of Property \_\_\_\_\_

\_\_\_\_\_

Owner	Name	Address	Telephone
_____	_____	_____	_____

Applicant	Name	Address	Telephone
_____	_____	_____	_____

Description of Request: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Reason for Request: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

NOTE: Please provide a signed plat or replat drawings from a registered surveyor

Date: \_\_\_\_\_

Signature of Applicant \_\_\_\_\_