

# CITY OF RICHLAND CENTER LAND SPLIT REQUEST

All Owner(s) of Property: \_\_\_\_\_

Owner's Address: \_\_\_\_\_

Owners Telephone Number: \_\_\_\_\_ Owner's e-mail: \_\_\_\_\_

Street Address of Property: \_\_\_\_\_

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

Tax parcel Number of Property: \_\_\_\_\_

(Note: This can be found on the tax bill for the property)

Zoning Classification of Property: \_\_\_\_\_

A Land Split is requested for: \_\_\_\_\_

\_\_\_\_\_

City       ETZ

Names and addresses of owners of all real estate within 200 feet of all property lines:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Signatures of all owners of the Property

Date Application filed with City Clerk \_\_\_\_\_

Referred to Planning Commission on \_\_\_\_\_

Recommendation from the Planning Commission: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Referred to Council on \_\_\_\_\_

Action of City Council: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Expiration date: \_\_\_\_\_

Land Split Form Version 2016