

# APPLICATION FOR RE-SUBDIVISION OF SINGLE FAMILY RESIDENTIAL LOTS

Name of Applicant: \_\_\_\_\_  
Address: \_\_\_\_\_  
Email Address: \_\_\_\_\_  
Telephone # \_\_\_\_\_ Fax No. \_\_\_\_\_  
Lot # \_\_\_\_\_ Plat \_\_\_\_\_  
Proposed Re-subdivision Name \_\_\_\_\_  
Size of Lot: \_\_\_\_\_ Zoning of Lot: \_\_\_\_\_  
Name of Surveyor: Address: \_\_\_\_\_  
Telephone # \_\_\_\_\_

Submit **16 FOLDED copies** of the final plat along with **one 11x17 copy** for Planning and Zoning Commission review and approval. Vicinity map needs to be shown on plat. **One diskette** containing the FINAL plat along with **one 8 1/2x11 copy** should also be submitted. The plat, application, diskette and **CERTIFIED list of property owners' names and addresses obtained from the St. Charles County Assessor's Office** within 300 feet of the property line placed on labels must be submitted 35 calendar days prior to a regular meeting.

**THERE IS A \$5.00 CHARGE FOR THE PUBLIC HEARING LETTER PLUS \$.79 PER LETTER SENT. PAYMENT IS MADE SEPARATE AT TIME OF SUBMITTAL.**

**The applicant or his representative is expected to be in attendance and make a presentation during the Public Hearing portion of the P&Z meeting.** The regular meeting is the 1<sup>st</sup> Thursday of each Month.

## FINAL PLAT SHOULD INCLUDE THE FOLLOWING:

Existing conditions of property: property lines, building lines, easements, improvements, etc.  
Proposed conditions of property: property line adjustments, new easements, improvements, etc.

Full script noting: Certification of ownership, certification of financial interests in property, designation of easements, existing deed restrictions, legal description of property, etc.

If any easement or portion of an easement is to be vacated in conjunction with the re-subdivision, all utilities must sign the plat.

**FEE: \$200.00 review fee is due at the time of application submittal.  
\$0.79 per letter mailed plus one-time charge of \$5.00 for public hearing letter  
\$400.00 estimated cost of advertisement in Newstime and St. Charles County Business Record.**

**Once the ads are placed, you will be notified regarding the difference.**

**Lake Saint Louis City ordinances state no application may be approved if the applicant, its entities or affiliates are in arrears as to payment of taxes or fees. (SECTION 135.260: TAXES MUST BE PAID PRIOR TO THE ISSUANCE OF ANY PERMIT, LICENSE OR FORMAL APPROVAL)**

## FOR OFFICE USE ONLY:

Filing Fee Amount: \_\_\_\_\_ Mailing Fee Amount: \_\_\_\_\_  
Date Fees Paid: \_\_\_\_\_

**REAL ESTATE OWNER AFFIDAVIT**

I, \_\_\_\_\_, am the owner or  
(Owner)

authorized agent of the owner of the parcel, which is the subject matter of the above application,  
and swears upon my oath that:

1. All taxes, fees and assessments, due and assessed by the City of Lake Saint Louis, have been paid with regard to the parcel, which is the subject matter of this application.
2. All taxes, fees and assessments, due and assessed by the City of Lake Saint Louis, have been paid with regard to all parcels in the City of Lake Saint Louis, owned by the same owner of the parcel of land which is the subject matter of this application.
3. All taxes, fees and assessments, due and assessed by the City of Lake Saint Louis, have been paid with regard to all parcels of land owned by the control entities of the owner of the parcels which are the subject matter of this application.
4. All taxes and fees due and assessed by the City of Lake Saint Louis have been paid with regard to all parcels in the City of Lake Saint Louis owned by affiliates of the owner of the parcels which are the subject matter of this application, including those entities which are controlled by owner.

\_\_\_\_\_  
Signature of Owner (if individual) or  
Signature of Authorized Agent of Applicant

