

Minor Plat Application

City of Warrensburg 102 S. Holden Warrensburg, MO 64093 PH: 660.747.9135

Plat Name:	Date Plat Submitted:	
Location:		
Owner:	Survey Firm:	
Address:	Contact Person:	
	Address:	
Phone #:		
Email:	Phone #:	
	Email:	
Developer (If different than owner):	Engineering Firm for Construction Documents:	
Address:	Contact Person:	
	Address:	
Phone #:		
Email:	Phone #:	
	Email:	
Project Characteristics Zoning:	Floodplain Zone:	
No. of Lots	Total Acres:	
The undersigned person(s) here estate included in the proposed Owner's Name: Address:	eby certify they are the owner (s) of record of the entire fee s	
Owner's Name:	Signature:	
Address:		
Please submit completed applic	cation form and following items to the City Planner.	

1. 1 paper copy of the plat and 1 PDF file of the plat emailed to the City Planner.

- 2. Receipts from each of the utility companies stating they received a copy of the same plat.
- 3. Filing fee.

Filing Fee: \$250 Date Paid: