



SANTA CRUZ COUNTY

**AMENDED PLAT
APPLICATION**

COMMUNITY DEVELOPMENT
PLANNING DIVISION

Case Number: _____ **Date of Submittal:** _____

Subdivision Name: _____

Location: _____ Town: _____

Township: _____ Section: _____ Range: _____ District # _____

Proposed Number of Lots: _____ Acres: _____

Owner: _____ Contact: _____ Phone # _____

Applicant: _____ Contact: _____ Phone # _____

Engineer: _____ Contact: _____ Phone # _____

Architect: _____ Contact: _____ Phone # _____

Landscape Architect: _____ Contact: _____ Phone # _____

Project Planner: _____ Contact: _____ Phone # _____

Estimated date of Tentative submittal: _____

Has this property ever been subdivided or have any other binding recorded information? _____

If yes, state book and page: _____

Current Zoning: _____

Water: _____

Septic: _____

Electric: _____

Gas: _____

Phone: _____

Fire: _____

Elementary School: _____

Jr. High School: _____

High School: _____

Proposed Zoning
(if necessary): _____

PUBLIC ACCESS STATEMENT:

I/WE herein agree to meet the minimum design standards of all applicable regulations.

Applicant Signature

Date