## Subdivision Final Plat Approval Form

Cascade County Public Works Department  
Planning Division  
121 4th St No, STE 2H/I, Great Falls MT 59401  
Phone: 406-454-6905 Fax: 406-454-6919

<table>
<thead>
<tr>
<th>OFFICE USE ONLY</th>
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<tbody>
<tr>
<td><strong>Application #:</strong></td>
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<tr>
<td><strong>Date Form Received:</strong></td>
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<td><strong>Type of Subdivision:</strong></td>
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### Date: ______________

1. **Name of Subdivision:** ____________________________________________

2. **Location:** ______ 1/4 Section ______ Township ______ Range ______  
   For Amended Plats: Lot(s) _____ Block(s) ______________________ Subdivision

3. **Name of Subdivider:** ____________________________________________

   **Mailing Address:** ____________________________________________

   **City:** __________________ **State:** ______ **Zip:** _____ **Phone #:** ____________

4. **Name, address and telephone number of persons of firms providing services and information**  
   (e.g.: surveyor, engineer, designer, planning consultant, attorney)

   **Name of Representative(s):** ____________________________________________

   **Mailing Address:** ____________________________________________

   **City:** __________________ **State:** ______ **Zip:** _____ **Phone #:** ____________

5. **Descriptive Data:**
   a. **Gross area in acres** ____________________________________________
   b. **Number of lots or rental spaces** _________________________________
   c. **Existing zoning or other regulations** ______________________________

6. **Date Preliminary Plat Approved:** _________________________________

7. **Any Conditions? _______ (If Yes, attach list of conditions.)**

8. **Any Deed restrictions or covenants? _______ (If Yes, attach a copy.)**
9. All improvements installed? _______ (If No, attach subdivision improvements agreement or guarantees.)

10. List of materials submitted with this final plat approval form:
   a. __________________________________________________________
   b. __________________________________________________________
   c. __________________________________________________________
   d. __________________________________________________________
   e. __________________________________________________________
   f. __________________________________________________________

I do hereby certify that all the statements and information to include those contained in all exhibits transmitted herewith are true. I hereby apply to the Board of Commissioners of Cascade County for approval of the final plat.

______________________________
Subdivider