



TRACT/LOT SPLIT APPLICATION

Office Use Only

Application No. _____ Date Received _____
 Township _____ Zoning Board _____
 Deed of ROW Dedication Filed _____ Fee _____ Date Paid _____

EXISTING TRACT INFORMATION

Existing Acreage _____
 Existing Zoning _____ S-T-R _____ Property ID _____

OWNERSHIP INFORMATION

TRACT 1

NAME _____
 ADDRESS _____
 CITY/ST/ZIP _____

 PHONE _____
 EMAIL _____
 CONTACT PERSON _____

TRACT 2 (If under different ownership)

NAME _____
 ADDRESS _____
 CITY/ST/ZIP _____

 PHONE _____
 EMAIL _____
 CONTACT PERSON _____

PROPOSED SITE ADDRESS

Tract 1 _____
 Tract 2 _____

PROPOSED ACREAGE

I, the undersigned, am the (*circle one*) **owner/duly-authorized agent** of the aforementioned property situated in the unincorporated portion of Johnson County, Kansas. By execution of my signature, I do hereby officially apply for a Tract/Lot Split as indicated above.

Signature _____ Date _____
 Owner, Tract 1

Signature _____ Date _____
 Owner, Tract 2

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Disposition _____ Date _____
 Signature _____ Title _____

ATTACHMENT A