



PO Drawer 400 • 2665 San Angelo • Ingleside, TX 78362  
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### PRELIMINARY AND/OR FINAL PLAT/REPLAT OF PROPERTY

Date Filed: \_\_\_\_\_

Receipt #: \_\_\_\_\_

In accordance with the Planning and Zoning Subdivision Ordinance, Chapter 54, Article III, application for preliminary and/or final plat/replat is requested on the property below:

Applicant Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone #: \_\_\_\_\_

Email Address: \_\_\_\_\_

Property owner name (if different): \_\_\_\_\_

Address: \_\_\_\_\_

Phone #: \_\_\_\_\_

Email Address: \_\_\_\_\_

*Legal description of property to be platted:*

Lot: \_\_\_\_\_ Blk: \_\_\_\_\_ Subdivision: \_\_\_\_\_

Lot Size: \_\_\_\_\_ Ft X \_\_\_\_\_ Ft Street name facing location: \_\_\_\_\_

*New legal description of property if approved:*

Lot: \_\_\_\_\_ Blk: \_\_\_\_\_ Subdivision: \_\_\_\_\_

**I CERTIFY THAT THE ABOVE ANSWERS ARE TRUE AND CORRECT. I ALSO UNDERSTAND THAT ATTENDANCE IS MANDATORY, EITHER BY MYSELF OR A REPRESENTATIVE, AT BOTH PLANNING & ZONING AND THE CITY COUNCIL, FOR THIS REQUEST TO BE CONSIDERED. I ALSO UNDERSTAND THAT FAILURE TO ATTEND WILL RESULT IN TERMINATION OF PROCESS AND RE-APPLICATION WILL BE REQUIRED.**

Planning & Zoning Public Hearing: \_\_\_\_\_ Time: \_\_\_\_\_

City Council Public Hearing: \_\_\_\_\_ Time: \_\_\_\_\_

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Owner: \_\_\_\_\_ Date: \_\_\_\_\_

Accepted by the Building Department on \_\_\_\_\_ By: \_\_\_\_\_