



City of Columbia APPLICATION for PLAT APPROVAL

Date Received (OFFICE USE ONLY) _____

By (OFFICE USE ONLY) _____

Total Fee: (OFFICE USE ONLY) _____

Applicant (PLEASE PRINT): _____

Address: _____

City, State, ZIP: _____

Contact Telephone Number: _____

Fax Number: _____

Tax Map Reference #: _____

Zoning: _____

Existing Number of Parcels: _____

Proposed Number of Parcels: _____

For **each** parcel after subdivision list parcel square footage, building gross square footage (if applicable) and number of dwelling units (if applicable):

By signing below, I understand that, while this application will be carefully reviewed and considered, I am required to comply with all provisions of the Subdivision Ordinance. I further understand that I am required to provide water and/or sewer service to any new lots created as a result of this subdivision.

Signature _____ Date _____

NOT TO BE FILLED OUT BY APPLICANT

Application Date: _____

Application Number: _____

Date of Zoning Review: _____

Staff: _____

Approved: Yes No

If no – reason: _____

Date Sent to Engineering: _____

Engineering

Water Available Yes No Initials: _____

Notes: _____

Sewer Available Yes No Initials: _____

Notes: _____

Flood Plain Yes No Initials: _____

Notes: _____

Address Assigned: Yes No Initials: _____

Date Returned to Zoning: _____



LETTER OF AGENCY

DATE: _____
TO: **ZONING ADMINISTRATOR, CITY OF COLUMBIA**

I, the undersigned PROPERTY OWNER below, do hereby attest that I am the person that holds, or I am authorized to act on behalf of the party that holds, fee simple interest in the following property:

COMMON STREET ADDRESS(ES): _____,

also known by TAX MAP NUMBER(S): _____.

Further, I hereby authorize the person listed as AUTHORIZED AGENT below to act on my behalf for the purpose of submitting documents, amending documents, meeting with staff, attending public meetings and hearings, and as otherwise may be necessary and proper to fulfill the required steps to request (CHECK ALL THAT APPLY):

- a **variance** from the Board of Zoning Appeals;
- a **special exception** from the Board of Zoning Appeals;
- an **appeal of the decision of the Zoning Administrator** from the Board of Zoning Appeals;
- a change to the Zoning Maps of the City of Columbia from City Council, **rezoning** the property listed above from _____ to _____;
- site plan review** by the Planning Commission;
- a **minor subdivision**; and/or
- other** (describe) _____

SIGNATURE OF PROPERTY OWNER: _____ DATE: _____
PRINT Name of Property Owner: _____
Street Address of Property Owner: _____
City, State, ZIP of Property Owner: _____
Telephone Number of Property Owner: _____

SIGNATURE OF WITNESS: _____ DATE: _____
PRINT Name of Witness to Signature of Property Owner: _____

SIGNATURE OF AUTHORIZED AGENT: _____ DATE: _____
Name of Authorized Agent: _____
Company/Firm of Authorized Agent: _____
Street Address of Authorized Agent: _____
City, State, ZIP of Authorized Agent: _____
Telephone Number of Authorized Agent: _____