



TWIN FALLS COUNTY COMMUNITY DEVELOPMENT SERVICES

630 Addison Avenue West, Suite 1100, Twin Falls, Idaho 83301
Ph. 208-734-9490 Fax. 208-733-9645 www.twinfallscounty.org

SUBDIVISION FINAL PLAT APPLICATION

Date Received: _____

Application fee: \$_____

County Engineer Plat Check Fees: \$_____

PROPERTY OWNER OF RECORD

Name: _____

Address: _____

City: _____

Phone: _____

Cell or other #: _____

APPLICANT / REPRESENTATIVE

Name: _____

Address: _____

City: _____

Phone: _____

Cell or other #: _____

Submit the following information:

1. Compliance with conditions of approval.
2. Cost estimate of improvements.
3. Development Agreement.
4. Performance Guarantee.
5. Grid addressing
6. Final Plat
7. A 24" x 36" & 11" x 17" paper copy, and disc copy of the final plat.
8. Draft CC&Rs.
9. Road maintenance agreement, if private roads.
10. Water stock information.
11. Irrigation facilities and drainage systems plans.

I hereby verify the conditions have been met and hereby certify that the information I have provided is correct.

Signature of Owner / Developer

Date