Cascade County Subdivision Final Plat Approval Form

CASCADE COUNTY PLANNING & GIS DEPARTMENT
121 4TH ST NO, STE 2H/I, GREAT FALLS MT 59401
PHONE: 406-454-6905 | FAX: 406-454-6919
CADECOUNTYMT.GOV | www.cascadecountymt.gov

$600.00 Nonrefundable Application Fee

OFFICE USE ONLY

Application #: _____ Payment: ☐ Check (#) _____ ☐ Cash ☐ Electronic

Date Form Received: _____ Final Approval/Rejection Date: _____

Type of Subdivision: _____

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 #: _____

   Email Address: _____
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 #: _____

   Email Address: _____
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