



# Flathead County

## Planning & Zoning

40 11<sup>th</sup> Street West, Suite 220 Kalispell, MT 59901

Telephone 406.751.8200

### **FIRST MINOR SUBDIVISION** **APPLICATION FOR ADMINISTRATIVE APPROVAL OF** **PRELIMINARY PLAT**

*Submit this application, all required information, and appropriate fee (see current fee schedule) to the Planning & Zoning office at the address listed above.*

**FEE ATTACHED \$ \_\_\_\_\_**

**SUBDIVISION NAME:** \_\_\_\_\_

**OWNER(S) OF RECORD:**

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

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

City, State, Zip: \_\_\_\_\_

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

**APPLICANT (IF DIFFERENT THAN ABOVE):**

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

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

City, State, Zip: \_\_\_\_\_

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

**TECHNICAL/PROFESSIONAL PARTICIPANTS:**

1. Name: \_\_\_\_\_ Phone: \_\_\_\_\_

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

City, State, Zip: \_\_\_\_\_

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

2. Name: \_\_\_\_\_ Phone: \_\_\_\_\_

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

City, State, Zip: \_\_\_\_\_

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

**LEGAL DESCRIPTION OF PROPERTY:**

Street Address \_\_\_\_\_

City/State & Zip \_\_\_\_\_

Assessor's Tract No.(s) \_\_\_\_\_ Lot No.(s) \_\_\_\_\_

Section \_\_\_\_\_ Township \_\_\_\_\_ Range \_\_\_\_\_

**GENERAL DESCRIPTION OF SUBDIVISION:** \_\_\_\_\_

Number of Lots or Rental Spaces \_\_\_\_\_ Total Acreage in Subdivision \_\_\_\_\_

Total Acreage in Lots \_\_\_\_\_ Minimum Size of Lots or Spaces \_\_\_\_\_

Total Acreage in Streets or Roads \_\_\_\_\_ Maximum Size of Lots or Spaces \_\_\_\_\_

Total Acreage in Parks, Open Spaces and/or Common Areas \_\_\_\_\_

**PROPOSED USE(S) AND NUMBER OF ASSOCIATED LOTS/SPACES:**

Single Family \_\_\_\_\_ Townhouse \_\_\_\_\_ Mobile Home Park \_\_\_\_\_

Duplex \_\_\_\_\_ Apartment \_\_\_\_\_ RV Park \_\_\_\_\_

Commercial \_\_\_\_\_ Industrial \_\_\_\_\_ Condominium \_\_\_\_\_

Multi-Family \_\_\_\_\_ Other \_\_\_\_\_

**IS SUBJECT PROPERTY LOCATED WITHIN 3-MILE BUFFER OF KALISPELL,  
WHITEFISH OR COLUMBIA FALLS?** \_\_\_\_\_

**APPLICABLE ZONING DESIGNATION & DISTRICT** \_\_\_\_\_

**IMPROVEMENTS TO BE PROVIDED:**

**Water and Sewer District:** \_\_\_\_\_

**Roads:** \_\_\_\_ Gravel \_\_\_\_ Paved \_\_\_\_ Curb \_\_\_\_ Gutter \_\_\_\_ Sidewalks \_\_\_\_ Alleys \_\_\_\_ Other

**Other Utilities:** \_\_\_\_ Cable TV \_\_\_\_ Telephone \_\_\_\_ Electric \_\_\_\_ Gas \_\_\_\_ Other

**Solid Waste:** \_\_\_\_ Home Pick Up \_\_\_\_ Central Storage \_\_\_\_ Contract Hauler \_\_\_\_ Owner Haul

**Mail Delivery:** \_\_\_\_ Central \_\_\_\_ Individual

**School District:** \_\_\_\_\_

**Fire Protection:** \_\_\_\_ Hydrants \_\_\_\_ Tanker Recharge Fire District: \_\_\_\_\_

**Drainage System:** \_\_\_\_\_

The application for Administrative Approval of a First Minor Subdivision Preliminary Plat will be reviewed under provisions and qualifying criteria outlined in Section 4.2.1 of the Flathead County Subdivision Regulations.

**APPLICATION CONTENTS:**

1. Completed preliminary plat application.
2. One folded copy of the preliminary plat (*either 18" X 24" or 24" X 36" per Appendix B-Flathead County Subdivision Regulations*).
3. One reduced copy of the preliminary plat not to exceed 11" x 17" in size.
4. One reproducible set of supplemental information (*See Appendix B -Flathead County Subdivision Regulations*).
5. A copy of a will-serve letter from a county water and/or sewer district created under 7-13-2203 MCA that supplies both water and sewer services.
6. Digital copy of the application and all supplemental materials.
7. Application fee.
8. A separate fee made out to 'GIS' for the 'Adjoining Property Owners List'. The list will be sent directly to the Planning & Zoning office and is valid for a period of 6 months from date generated. You may also get a certified adjoining landowners list from a title company if you choose.

*This application shall be submitted, along with all information required by the applicable Subdivision Regulations and the Montana Subdivision and Platting Act, and the appropriate fee to:*  
**Flathead County Planning & Zoning Office 40 11<sup>th</sup> Street West, Ste 220**  
**Kalispell, Montana 59901 - Phone: (406) 751-8200**

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*I hereby certify under penalty of perjury and the laws of the State of Montana that the information submitted herein, on all other submitted forms, documents, plans or any other information submitted as a part of this application, to be true, complete, and accurate to the best of my knowledge. Should any information or representation submitted in connection with this application be untrue, I understand that any approval based thereon may be rescinded and other appropriate action taken. The signing of this application signifies approval for the FCPZ staff to be present on the property for routine monitoring and inspection during the approval and development process.*

\_\_\_\_\_  
Owner(s) Signature (*all owners must sign*)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Applicant Signature (*if different than above*)

\_\_\_\_\_  
Date