



Application for: *Check the appropriate box.*

- | | |
|---|--|
| <input type="checkbox"/> Preliminary/Final Plat | <input type="checkbox"/> Minor Plat |
| <input type="checkbox"/> Preliminary Plat | <input type="checkbox"/> Replat |
| <input type="checkbox"/> Final Plat | <input type="checkbox"/> Vacating Plat |
| <input type="checkbox"/> Amended Plat | <input type="checkbox"/> Right-of-Way Dedication |

For Office Use Only

Case No. _____
 Date Submitted _____
 Amount Paid _____
 By _____
Application Version 3-2022

Please type or print clearly, and sign where indicated.

Applicant Information		Name	
Address		City, State, Zip	
Company		Telephone	
E-mail			

Print Name _____

Signature of Applicant _____

Agent/Engineer/Primary Contact Information <i>(If different from applicant)</i>	
Name	
Company	
Address	
City, State, Zip	
Telephone	
E-mail	

Property Owner(s) Information	
Name	
Company	
Address	
City, State, Zip	
Telephone	
E-mail	

Print Name _____

Signature of Agent/Contact _____

In lieu of representing this application myself as owner of the subject property, I hereby designate _____ to act in the capacity of my agent for submittal, processing, representation and/or presentation of this request. The designated agent shall be the principal contact person for responding to all requests for information and for resolving all issues of concern relative to this request.

I hereby certify that I am legally authorized to sign this application on behalf of the owner of the property, and to designate the applicant and the agent to represent the owner in this application.

I understand that it is necessary for me or my authorized agent to be present at both the Planning and Zoning Commission public hearing and at the City Council public hearing if council action is necessary.

Print Name _____

Signature of Property Owner/Authorized Representative _____

Location of Request (Address if Applicable)		Location Size ([Acres] [sq. ft.])	
Proposed Subdivision Name			
Survey Name		Abstract No.	
Existing Zoning		Pending Zoning (If applicable)	
No. of Lots		No. of Dwelling Units	

Proposed Development or Reason for Request _____

Please provide separate improvement survey if the property has existing improvements



Plat Application (continued)

Case #: _____

Proposed Plat Name: _____

Is this a replat of an existing subdivision, lot or portions of lots? Yes No

If yes, please provide the following:

Subdivision Name _____ Lot _____ Block _____

Date Filed with Dallas County _____

Was this property restricted by either zoning or deed restrictions to single-family or two-family residential use at any time during the preceding five (5) years? Yes No

Please initial **each statement** to acknowledge you have **read and understand** the following statements:

_____ I understand that, while the City of Irving agrees to receive this plat application today, the application is not considered to be filed with the City unless and until all required documents and fees have been submitted, as noted at the bottom of this page.

_____ I understand that Section 212.009 of the Texas Local Government Code requires that the City of Irving shall act upon a plat within thirty (30) days after the date the plat application is filed.

_____ I also understand that the City of Irving Subdivision Rules and Regulations include detailed requirements for the form and content of a plat, including compliance with current zoning, and they include a requirement that engineering plans for civil improvements necessary to serve the subdivision (if any) must be approved by the city engineer before the staff, Irving Planning and Zoning Commission or City Council can approve the plat.

_____ I understand the requirements for a complete application, the requirements of the subdivision ordinance, and the potential process as provided in HB 3167 if the plat does not meet regulations.

_____ I understand that if my plat application is not complete or if revisions do not address deficiencies, City staff will present the plat to the Planning and Zoning Commission with a recommendation of Disapproval or Denial.

Signature of Owner or Authorized Representative

Date

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Submittal Documents (Required)

- Other Department Sign-offs (CIP, Water, Traffic and Fire)
- Two (2) 24" x 36" Copies of the Proposed Plat and/or Flash Drive/ PDF Attachment
- Application and Fee
- Original Signature(s) from Current Owner(s)
- Signed Receipt of "Plat Submission and Process Changes" Handout
- Legal Description with Exhibit

Please e-mail your completed documents to:
Planning@cityofirving.org