



Fee: \$150 plus filing fee

REQUEST FOR LOT SPLIT

Owner Name

Name _____

Address _____

Phone Number _____ Email: _____

Property Information:

PID Number: _____ Lot: _____ Block: _____

Address _____

Description of Request: _____

Reason for Request: _____

Survey and new property description included: Yes No

As owner of the above-described property, I request the parcel be divided.

Date: _____

Signed _____

OFFICE USE

Approved Denied Council Meeting Date _____

Survey Provided: _____ Resolution Number: _____

Fee Paid _____ Date _____