



City of Buhl
Planning & Zoning Department
201 Broadway Ave N Buhl, ID 83316

Phone: 208-308-9814

Fax: 208-543-2884

www.cityofbuhl.us

FINAL PLAT APPLICATION

Date: _____

Approved Preliminary Plat Date: _____

Subdivision Name: _____

Total Acreage: _____

Number of Lots: _____

Type of Plat: Subdivision Plat PUD Subdivision Plat

Proposed Land Use: Residential Commercial Industrial Mixed Use

If Residential, what type? Single-Family Duplex 4-plex

PROPERTY INFORMATION

Address: _____

Subdivision: _____

Primary Parcel #: _____

Additional Parcels: _____

Zoning District(s): R-1 R-4 R-16 R-P B-1 B-2 B-3 I-1 I-2

Need to rezone? Yes No *If yes, a rezone application must be submitted separately with its fees.*

Comprehensive Plan Land Use Designation: _____

DEVELOPER/APPLICANT INFORMATION

First Name: _____ Last Name: _____

Company: _____

Address: _____ City: _____ State: _____ ZIP Code: _____

Phone: _____ Email: _____ Fax: _____

ENGINEERING FIRM:

First Name: _____ Last Name: _____

Company: _____

Address: _____ City: _____ State: _____ ZIP Code: _____

Phone: _____ Email: _____ Fax: _____

OWNER INFORMATION

Same as the applicant? Yes No *If yes, leave this section blank.*

First Name: _____ Last Name: _____

Company: _____

Address: _____ City: _____ State: _____ ZIP Code: _____

Phone: _____ Email: _____ Fax: _____

REQUIRED SUBMITTAL MATERIALS

The following items must be submitted before the application will be accepted for review:

- Completed Application**
 - Written request for Final Plat approval**
 - Application fee:** \$ _____ Payable to the City of Buhl
(\$500.00 per plat + \$15.00 per lot, tract, and/or parcel)
 - Approved Preliminary Plat**—One (1) Copy—8 ½"x11" in size—Including any conditions placed by the Commission.
 - Final Plat Documents**—In compliance with the approved Preliminary Plat and with Buhl City Code §9-24D-13 standards.
 - One (1) Copy—24"x36" in size One (1) Copy—8 ½"x11" in size
 - Digital copy (PDF and CAD/GIS file) Original Final Plat Mylar (24"x36") for recording
 - Final Engineering Construction Drawings** in accordance with Buhl City Code §9-24D-13 standards.
 - Engineer's Estimate** (Engineer's Opinion of Probable Construction Cost) for all required subdivision improvements
 - Assurance of Construction**
 - Proof of Current Ownership** of the property for which the request is being made by providing a copy of:
 - Warranty Deed, or Earnest Money agreement, or Contract of Sale, duly acknowledged by **both Buyer and Seller**
 - Current Title Report or Commitment** (issued within the past 30 days)
 - Certification of Water/Sewer Plan Approval** from the Idaho Dept of Environmental Quality (IDEQ).
 - Stormwater Pollution Prevention Plan** filed and approved by the Idaho Dept of Environmental Quality (IDEQ).
 - Proof of Irrigation Water Transfer or Retention Plan**—per Buhl City Code §9-24B-7(4)
 - Developer's Improvement Agreement**—Signed and Notarized copy, ready to be signed by the city
 - Weed Management Plan**—per Buhl City Code §9-24B-7(4)
- Agency Approvals**—To complete this application, comments and/or approvals from stakeholders/agencies are required. Please allow 30 days for their response.
- Affidavit of Legal Interest**

APPLICANT ACKNOWLEDGEMENT

I understand that:

1. This application is subject to acceptance by the City of Buhl upon determination that the application is complete.
2. This application is subject to a public hearing before the City of Buhl Planning and Zoning Commission.
3. The application fee is non-refundable.
4. The applicant is responsible for fees for water and sewer models, if required.

All information, statements, attachments, and exhibits included with this application submittal are true to the best of my knowledge.

Owner/Authorized Representative Signature

Date

The Administrator has the right to withhold official acceptance of the application until a thorough review is completed and all required information and fees have been submitted. The Administrator will schedule the public hearing date before the Planning & Zoning Commission once the application is complete.

OFFICIAL USE ONLY:

FEE AMOUNT \$ _____

CASH

CHECK NO. _____

CREDIT/DEBIT

DATE OF SUBMITTAL: _____

RECEIVED BY: _____

P & Z HEARING: _____

Approved? Yes No

COUNCIL HEARING: _____

Approved? Yes No