



100 E 4th St
PO Box 276
York, NE 68467
402-363-2600

APPLICATION FOR A PRELIMINARY PLAT

Comes now the petitioner _____
_____ and hereby submits this
application for a preliminary plat.

Legal Description:

Signature of Applicant Date

Address: _____

Phone #: _____

Email: _____

GUIDELINES:

- 1) The application must be accompanied by the plat.
- 2) The application must be accompanied by a check in the amount of \$50.00
- 3) The application must be filed with the City of York by the 15th of the month. It will be put on the agenda for the following month.
- 4) The final plat **must** be signed by all parties.

Date filed: _____