



415 N. College Ave
Justin, Texas 76247
(940) 648-2541

City of Justin Plat Application

Reference #: _____

Type of Plat: Preliminary Plat Final Plat Plat Revision Administrative Plat

Title of Plat _____

Total Lots _____ Total Acres _____ Current Zoning _____

Subdivision Name _____ Lot(s) _____ Blocks(s) _____

Survey Name(s) _____ Abstract No.(s) _____ Tract(s) _____

Address/Location _____

Please submit all plat documents and ensure they are in compliance with the City of Justin Subdivision Ordinance.

Applicant

Company or Name

Contact Name

Address

(City, State, Zip)

Telephone

Email

Owner (If Different)

Company or Name

Contact Name

Address

(City, State, Zip)

Telephone

Email

I further understand that this request will be placed on the appropriate Planning & Zoning Commission and City Council agendas and must meet requirements of the Subdivision Regulations. All plats must be accepted in writing by the City Manager. A plat is not considered filed until accepted by the City Council.

Signature of Applicant, Owner, or Authorized Agent

Date

Planning Official

Fee: \$ _____

Date of P&Z Meeting _____
Date of Council Meeting

Signature of Planning Official

****FOR OFFICE USE ONLY****

Received By _____
Date Received _____
Date Approved

Date Paid Cash CC Check #(s): _____