



**EXEMPT SUBDIVISION REQUEST**

Date \_\_\_\_\_

To The City of Foley Planning Commission

I, \_\_\_\_\_ as owner of the property located at:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Am requesting an exemption from the City of Foley Subdivision Regulations for a

\*Family Split \_\_\_\_\_ One-time Split \_\_\_\_\_ Lot Line Shift \_\_\_\_\_

on, Parcel# \_\_\_\_\_ PIN # \_\_\_\_\_

Parcel currently consists of \_\_\_\_\_ lot(s) on \_\_\_\_\_ acre(s), and will be divided into \_\_\_\_\_ lot(s) consisting of \_\_\_\_\_ acres.

\_\_\_\_\_  
Signature

Address (if different from above):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Phone # \_\_\_\_\_ E-mail \_\_\_\_\_

\*Names of family members:

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Provide drawing of property location with dimensions of lots to be split.

Copy of deed

Owner Authorization form



**AGENT AUTHORIZATION FORM**

I/We authorize and permit \_\_\_\_\_  
to act as My/Our representative and agent in any manner regarding this application which  
relates to property described as tax parcel ID# \_\_\_\_\_

I/We understand that the agent representation may include but not be limited to decisions  
relating to the submittal, status, conditions, or withdrawal of this application. In understanding  
this, I/We release the City of Foley from any liability resulting from actions made on My/Our  
behalf by the authorized agent and representative. I hereby certify that the information stated  
on and submitted with this application is true and correct. I also understand that the submittal of  
incorrect information will result in the revocation of this application and any work performed will  
be at the risk of the applicant.

*\*Note: All correspondence will be sent to the authorized representative. It will be the  
representative's responsibility to keep the owner(s) adequately informed as to the status of the  
application.*

**PROPERTY OWNER(S):**

\_\_\_\_\_  
Name(s) printed

\_\_\_\_\_  
Address

\_\_\_\_\_  
City/State

\_\_\_\_\_  
Phone

\_\_\_\_\_  
Email

\_\_\_\_\_  
Fax

\_\_\_\_\_  
Signature(s)

\_\_\_\_\_  
Date

**PROPERTY OWNER(S):**

\_\_\_\_\_  
Name(s) printed

\_\_\_\_\_  
Address

\_\_\_\_\_  
City/State

\_\_\_\_\_  
Phone

\_\_\_\_\_  
Email

\_\_\_\_\_  
Fax

\_\_\_\_\_  
Signature(s)

\_\_\_\_\_  
Date