MINOR SUBDIVISION CHECK LIST
(Five (5) lots or less)

1. _____ Pre-Application meeting

2. _____ Completed application

3. _____ Basic Fee ($250.00, plus $30.00 per lot)

4. _____ 3-Full size plats
   _____ 1-11” x 17” plat

5. _____ List of names & addresses of all adjacent property owners as they appear on the most recent Baldwin County tax records

6. _____ Utility availability letters

7. _____ Deed

8. _____ Owner Authorization Form

9. _____ Submittal letter from Baldwin County if located in the ETJ
CITY OF FOLEY, ALABAMA
APPLICATION FOR A MINOR SUBDIVISION

Date __________________________ City Limits____ ETJ____

1. Name of Subdivision ____________________________________________________________

2. Name of Applicant/Owner _______________________________________________________

   Phone __________________________ Email ______________________________

   Address _________________________

   (Street Number and Name) (City) (State) (Zip Code)

3. Engineer _________________________________________________________________

   Phone __________________________ Email ______________________________

   Address _________________________

   (Street Number and Name) (City) (State) (Zip Code)

4. Location of Subdivision _______________________________________________________

5. Total Acreage _________________ Number of Lots ___________________________

6. Parcel Pin # ______________________

7. I ____________________________________________, hereby depose and say that all the above statements and the
   statements contained in the papers submitted here within are true.

   Signature/Title ________________________________

   Mailing Address ________________________________

   ________________________________

   Phone __________________________

   Email __________________________
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
MEMORANDUM OF TRANSMITTAL
FOR EXTRA TERRITORIAL JURISDICTION ONLY

Date: _______________________

To: The City of Foley Planning Commission

Applicant certifies that submittals have been made for the following identified Extra-territorial subdivision to the Baldwin County Engineering Department as evidenced by the certificate affixed below:

Name of Subdivision: ____________________________________
Parcel PIN # _____________________________________________
Signature of Applicant: ___________________________________

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I, the undersigned, hereby acknowledge receipt of plat and/or plans for the proposed development named above. (Signature on this acknowledgement shall not constitute any approval of such plans.)

Received: ____________________

Date By: For the Engineer/Planner