

APPLICATION FOR A LOT SPLIT
Planning & Development Services Department

OFFICE USE ONLY	
Petition No. _____	Fee: \$ _____
Hearing Date: _____	EZ Fee: \$ _____
Tax Map No. _____	Receipt No. _____
Account No. 001-660-6680-3401 []	
Account No. 001-660-6680-1124 (Enterprise Zone) []	
Account No. 001-660-6680-1125 (Enterprise Zone Credit []	

In accordance with Section 30-189, Land Development Code, City of Gainesville, FL:	
I (We) Name: _____	[] Owner
	[] Agent
Address: _____	
City: _____	
State: _____	Zip: _____
Phone: _____	Fax: _____
Hereby petition to the Planning Division, Department of Community Development, for a lot split on the property located at:	
Address or location: _____	
Tax parcel number: _____	

Land description of Lot #1 included on survey or scaled drawing: [] yes
 Land description of Lot #2 included on survey or scaled drawing: [] yes
 Water [] yes or [] no and Sanitary Sewer [] yes or no [], services are available to the property.

Owner(s) of Record (please print or type)		Owner(s) of Record (please print or type)	
Name: _____		Name: _____	
Address: _____		Address: _____	
City: _____		City: _____	
State: _____	Zip: _____	State: _____	Zip: _____
Phone: _____	Fax: _____	Phone: _____	Fax: _____

I understand that all utility service shall be installed beneath the surface of the ground in accordance with section 30-345. I also understand that no further division of this lot will be permitted under this section. If further divisions are desired, a record plat or minor subdivision must be prepared and submitted in accordance with the Code of Ordinances of the City of Gainesville.

Signature of owner(s): _____ Date: _____
 _____ Date: _____

Certified Cashier's Receipt:

OFFICE USE ONLY		
<i>Approval Check-Off</i>	<i>Yes</i>	<i>No</i>
Public Works	[]	[]
Building Division	[]	[]
Regional Utilities	[]	[]
Planning Division	[]	[]

In accordance with Section 30-189 of the City of Gainesville Code of Ordinances, the Department of Community Development hereby authorizes the granting of the lot split described above.

Signature: _____ Date: _____
Dept. of Community Development