



12803 S. Wacousta Rd., Grand Ledge, MI 48837

517-626-6593

517-626-6405 Fax

www.watertownmi.gov

## Application for Final Plat

Page 1 of 2

Applicant Name \_\_\_\_\_  
Applicant Address \_\_\_\_\_  
City/State/Zip \_\_\_\_\_  
Office Phone \_\_\_\_\_  
Cell Phone \_\_\_\_\_  
Fax \_\_\_\_\_  
Email \_\_\_\_\_

Name of Subdivision \_\_\_\_\_  
Address of Subdivision \_\_\_\_\_  
Parcel # 19- 150 \_\_\_\_\_  
Zoning District \_\_\_\_\_

Property Owner Address \_\_\_\_\_  
City/State/Zip \_\_\_\_\_  
Phone \_\_\_\_\_  
Cell Phone \_\_\_\_\_  
Email \_\_\_\_\_

*\*\*If the applicant is not the property owner, the applicant shall submit a certified statement by the property owner stating that the applicant is acting on the owner's behalf.*

Name of Developer \_\_\_\_\_  
Address of Developer \_\_\_\_\_  
Phone \_\_\_\_\_  
Cell Phone \_\_\_\_\_  
Email \_\_\_\_\_

Name of Engineer \_\_\_\_\_  
Address of Engineer \_\_\_\_\_  
City/State/Zip \_\_\_\_\_  
Phone \_\_\_\_\_  
Email \_\_\_\_\_

Name of Surveyor \_\_\_\_\_  
Address of Surveyor \_\_\_\_\_  
City/State/Zip \_\_\_\_\_  
Phone \_\_\_\_\_  
Email \_\_\_\_\_

*Staff use only:*

Case Number \_\_\_\_\_ Date Filed \_\_\_\_\_ Fee \_\_\_\_\_ Receipt # \_\_\_\_\_

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Page 2 of 2

The Subdivider shall certify that:

- ☐ The final plat conforms to the requirements and conditions of the preliminary plat.
- ☐ Four copies and one Mylar of the final plat have been submitted to the Township.

Final approval has been received in writing from:

- ☐ Clinton County Road Commission
- ☐ Clinton County Drain Commission
- ☐ Mid-Michigan District Health Department
- ☐ Capital Regional Airport Authority
- ☐ Watertown Charter Township Engineer

The Subdivider shall certify that he/she has obtained current copies of the following documents:

- ☐ Watertown Charter Township Zoning Ordinance
- ☐ Watertown Charter Township Subdivision Ordinance
- ☐ Land Division Act, 1967 PA 288, as amended (State)
- ☐ Watertown Charter Township Master Plan
- ☐ Watertown Charter Township Sewer Ordinance
- ☐ Regulations and/or standards of Clinton County Road Commission, Drain Commission, and, if applicable, Mid-Michigan District Health Department

Initial to certify: \_\_\_\_\_ Date: \_\_\_\_\_

**The fee for the Final Plat application is \$400.00 plus \$10.00 for every lot over 10.**