



TRACT/LOT SPLIT APPLICATION

Office Use Only

Application No. _____ Date Received _____
 Township _____ Zoning Board _____
 Deed of ROW Dedication Filed _____ Fee _____ Date Paid _____

EXISTING TRACT INFORMATION

Existing Acreage _____
 Existing Zoning _____ S-T-R _____ Property ID _____

OWNERSHIP INFORMATION

TRACT 1	TRACT 2 (If under different ownership)
Name _____	Name _____
Address _____	Address _____
City/St/Zip _____	City/St/Zip _____
Phone _____	Phone _____
Fax _____	Fax _____
Contact person _____	

PROPOSED SITE ADDRESS	PROPOSED ACREAGE
Tract 1 _____	_____
Tract 2 _____	_____

I, the undersigned, am the (circle one) **owner/duly-authorized agent** of the aforementioned property situated in the unincorporated portion of Johnson County, Kansas. By execution of my signature, I do hereby officially apply for a Tract/Lot Split as indicated above.

Signature _____ Date _____
 Owner, Tract 1

Signature _____ Date _____
 Owner, Tract 2

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Disposition _____ Date _____
 Signature _____ Title _____