**TOWN OF FRANKLINTON**

301 Eleventh Avenue

Franklinton, Louisiana 70438

985-839-3569

Fax: 985-839-3552

**Gregory Route, Mayor Aldermen:**

T.J. Butler, Jr.

Patrice Crain

Seth Descant

Darwin Sharp

 Heath Spears

**RE-SUBDIVISION APPLICATION PROCEDURES**

1. APPLICATIONS ARE AVAILABLE FROM THE CODE ENFORCEMENT OFFICER.

2. ALL PARTS OF THE APPLICATION FORMS ARE TO BE FILLED OUT AND AFFADAVIT

 FORM MUST BE NOTARIZED.

3. WE MUST HAVE THE APPLICATION FOUR (4) WEEKS PRIOR TO THE

 PLANNING COMMISSION MEETING AND OR PUBLIC HEARING. (DATE AND

 TIME OF PUBLIC HEARING WILL BE GIVEN TO YOU WHEN APPLICATION IS

 RECEIVED.

4. THE TOWN OF FRANKLINTON WILL ADVERTISE IN THE ERA LEADER ONE TIME

 PRIOR TO PUBLIC HEARING.

5. A $100.00 FEE MUST BE PAID WHEN APPLICATION IS SUBMITTED.

6. AFTER THE PUBLIC HEARING, THE PLANNING COMMISSION WILL MAKE A

 RECOMMENDATION TO THE BOARD OF ALDERMEN AT THE NEXT

 AVAILABLE REGULAR BOARD MEETING AND THEY WILL MAKE THE FINAL

 DECISION ON THE RE-SUBDIVISION APPLICATION.

7. APPLICANT MUST PROVIDE A COPY OF DEED TO PROPERTY. IF PROPERTY

 IS TITLED TO MULTIPLE OWNERS OR TO AN LLC OR CORPORATION, ALL PARTIES

 MUST SUBMIT A NOTORIZED STATEMENT WITH 2 WITNESSES AGREEING TO THE RE-

 SUBDIVISION OF SAID PROPERTY. IF OWNER(S) CHOOSE TO HAVE A

 REPRESENTATIVE APPLY ON THEIR BEHALF, A NOTORIZED AUTHORIZATION OF

 REPRESENTATION SIGNED BY OWNER WITH TWO WITNESS SIGNATURES MUST BE

 SUBMITTED WITH APPLICATION.

8. APPLICANT MUST PROVIDE 3 CERTIFIED COPIES OF THE SURVEY PLAT SHOWING THE

 PROPOSED RE-SUBDIVISION. EACH COPY MUST CONTAIN A SIGNATURE LINE FOR

 THE PLANNING COMMISSION CHAIRMAN ‘S SIGNATURE AND A LINE FOR THE

 MAYOR’S SIGNATURE.

9. ONCE APPROVAL IS GIVEN BY THE PLANNING COMMISSION AND THE MAYOR AND

 BOARD OF ALDERMEN, APPLICANT MUST FILE THE PLAT AT THE WASHINGTON

 PARISH CLERK OF COURT’S OFFICE. ONE COPY STAMPED BY THE CLERK OF COURT

 MUST BE RETURNED TO THE TOWN OF FRANKLINTON FOR OUR RECORDS.

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Date Received: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**RE-SUBDIVISION Application**

1. I (we) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2. of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Address) (Phone Number)

 Hereby petition the Town of Franklinton, La. to amend the planning map of Franklinton, La. from

 \_\_\_\_\_\_\_\_lots to \_\_\_\_\_\_\_\_lots. The property is described as follows and is outlined in RED on the

 attached map which are made a part of this application.

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

 Address of property to be re-subdivided (municipal number and street name)

3. Property location (Legal description for advertising)

 Lot No.(s)\_\_\_\_\_\_\_, Square/Block No.(s) \_\_\_\_\_\_Name of Subdivision\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Dimensions: Front\_\_\_\_\_\_\_\_\_\_, Sides \_\_\_\_\_\_\_\_\_\_\_ Rear\_\_\_\_\_\_\_\_\_\_

4. Existing use of property:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

5. Proposed use of property\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

6. Name and address of Owners of Record:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

7. Signature of owner\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Or Representative\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(Must Provide Notarized Authorization of

 Representation signed by owner(s) and two witnesses)

 Address of Representative\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**A SET OF PLANS MUST ACCOMPANY ALL APPLICATIONS FOR APARTMENTS OR COMMERCIAL BUILDINGS.**

 **8. Indicate location, dimensions and use of area requested and adjacent property. (Survey map must be attached for irregular properties or acreage property)**

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

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

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

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

***THIS APPLICATION MUST BE IN THE HANDS OF THE PLANNING & ZONING SECRETARY AT LEAST TEN DAYS***

***PRIOR TO THE MEETING AT WHICH IT WILL BE INTRODUCED. MEETINGS ARE HELD ON THE SECOND TUESDAY OF THE MONTH AT 5:00 P.M. IN THE MUNICIPAL BUILDING, 301 11TH AVE. FRANKLINTON, LA.***

***This case will be heard by the Planning Commission: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***

 ***Franklinton Board of Aldermen: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***

 ***Planning Commission Action \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***

 ***Board of Aldermen Action \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_***

***$100.00 FEE WITH APPLICATION***

***For assistance in completing this application, please call the Code Enforcement Office at 985-839-3569***

**AFFIDAVIT**

As owner(s) or Authorized Representative for owner(s) of an undivided interest in and to the property described as:

I hereby express my desire and request that the above described property be re-subdivided as follows and as per survey provided with this application:

 THUS DONE AND SIGNED BEFORE ME, NOTARY AND TWO WITNESSES AT

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_ on this \_\_\_\_day of \_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_

 (Name of City) (State)

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

 Owner/Representative Witness

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

 Witness

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

 Notary

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

 Notary Number