



Community Development Department

**Planning Division
Preliminary Plat Application**

200 S MAIN • P.O. BOX 180 • OWASSO, OKLAHOMA 74055 • (918) 376-1500 • planning@cityofowasso.com

PRELIMINARY PLAT APPLICATION

FOR OFFICE USE ONLY

Case Number:	
Date Received:	
TAC Date:	
PC Date:	
Fees Paid (\$300.00 + \$3.00 per address)	

CONTACT INFORMATION

PROPERTY OWNER NAME:

PHONE:

OWNER ADDRESS:

STREET CITY STATE ZIP

OWNER EMAIL:

APPLICANT NAME:

PHONE:

(If different than owner)

APPLICANT ADDRESS:

STREET CITY STATE ZIP

APPLICANT EMAIL:

ENGINEER/DESIGN FIRM:

PHONE:

FIRM ADDRESS:

STREET CITY STATE ZIP

FIRM EMAIL:

PROPERTY INFORMATION

PROPERTY ADDRESS:

STREET CITY STATE ZIP

SUBDIVISION OR DEVELOPMENT NAME:

COUNTY:

ACREAGE:

SQUARE FOOTAGE OF BUILDING(S):

CURRENT ZONING:



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PROPOSED ZONING:

OWASSO LAND USE MASTER PLAN DESIGNATION:

TYPE OF DEVELOPMENT

Retail/Commercial

Multi-Family Residential

Office

Mixed Use

Industrial

Other:

Number of dwelling units if a residential project:

SUBMITTAL

Please submit this completed application form with all required items to the Owasso [Planning Division](#). Applicants must submit a paper copy of all materials to Owasso City Hall **and** an electronic copy of all materials to planning@cityofowasso.com. Incomplete applications will not be accepted. Applications are due on or before the 1st of the month to be eligible for addition to that month's Technical Advisory Committee (TAC) meeting agenda. After TAC review, the application is included on the agenda for the next [Planning Commission](#) meeting. The applicant or the applicant's representative must attend the Technical Advisory Committee and Planning Commission meetings.

The submitted preliminary plat application packet must include:

Completed preliminary plat application and the accompanying checklist

Preliminary plat that meets all requirements as listed on the checklist

Legal description of the property (if by metes and bounds, attach plat of survey)

A certificate of closure from a licensed surveyor

Ten (10) full-size (24" x 36") copies of the preliminary plat

Five (5) half-size (11" x 17") copies of the preliminary plat

One (1) digital copy of all sheets (in PDF format) e-mailed to planning@cityofowasso.com

Application fee of \$300.00

Owner's signature (Attach an owner authorization letter if applicant is not record owner's agent)



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Please note that the [Engineering Division](#) of the Public Works Department requires a separate submittal packet that will contain the complete civil drawing set. Please contact them directly at (918)272-4959 for additional information.

SIGNATURES

I, _____ (applicant name), hereby certify that the attached and completed application contains the information required by the City of Owasso as specified above. I understand the submission of incomplete and inaccurate information may result in a delay in processing and action on this application.

Signature of Applicant:

Date:

Signature of Property Owner:

Date:

The property owner must sign the application or it will not be processed.

FOR OFFICE USE ONLY

Staff Signature:

Date:

Staff Comments: