



**Andrews County Judge**

201 N Main St, RM 104

Andrews, TX 79714

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**SUBDIVISION APPLICATION**

| SUBJECT PROPERTY INFORMATION  |  |
|---|--|
| APPLICATION DATE:   | RESUBMITTAL: <input type="checkbox"/> YES <input type="checkbox"/> NO  |
| PROJECT NAME:   | PRECINCT NO. <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 |
| IF RESUBMITTAL, PROJECT FORMERLY KNOWN AS:  |  |
| NUMBER OF LOTS:   | TOTAL ACREAGE:   |
| JURISDICTION: <input type="checkbox"/> CITY LIMITS <input type="checkbox"/> ETJ <input type="checkbox"/> OUTSIDE ALL CITY LIMITS AND ETJs |  |

\*This application shall expire five (5) years from the Application date if the project becomes dormant, as defined by Sec. 245.005, Texas Local Government Code, as amended. This application shall expire forty five (45) days from the date the Application is submitted if, after proper notification, the Application remains incomplete, as defined by Sec. 245.002e, Texas Local Government Code, as amended.

| TYPE OF APPLICATION                       |                                     |  |
|---|-------------------------------------|--|
| <input type="checkbox"/> PRELIMINARY PLAT | <input type="checkbox"/> FINAL PLAT | <input type="checkbox"/> AMENDED PLAT/REPLAT |

| DIGITAL FILE SUBMISSION*   |  |
|--|--|
| <input type="checkbox"/> ADOBE.pdf and <input type="checkbox"/> AutoCAD.dwg to COUNTY ENGINEER (email: ramon@kleinmanconsultants.us) |  |
| <input type="checkbox"/> ADOBE.pdf and <input type="checkbox"/> AutoCAD.dxf to 911 ADDRESSING (email: mcook@co.andrews.tx.us)        |  |

\*See Plat Review Checklist for additional submission requirements

| CONTACT INFORMATION   |          |      |                            |          |      |
|-----------------------|----------|------|----------------------------|----------|------|
| AGENT INFORMATION     |          |      | PROPERTY OWNER INFORMATION |          |      |
| FIRM NAME:            |          |      | OWNER NAME:                |          |      |
| CONTACT:              |          |      | CONTACT:                   |          |      |
| ADDRESS:              |          |      | ADDRESS:                   |          |      |
| CITY:                 | STATE:   | ZIP: | CITY:                      | STATE:   | ZIP: |
| PHONE: ( )            | FAX: ( ) |      | PHONE: ( )                 | FAX: ( ) |      |
| EMAIL:                |          |      | EMAIL:                     |          |      |
| DEVELOPER INFORMATION |          |      | SURVEYOR INFORMATION       |          |      |
| FIRM NAME:            |          |      | FIRM NAME:                 |          |      |
| CONTACT:              |          |      | CONTACT:                   |          |      |
| ADDRESS:              |          |      | ADDRESS:                   |          |      |
| CITY:                 | STATE:   | ZIP: | CITY:                      | STATE:   | ZIP: |
| PHONE: ( )            | FAX: ( ) |      | PHONE: ( )                 | FAX: ( ) |      |
| EMAIL:                |          |      | EMAIL:                     |          |      |

| ENGINEER INFORMATION |          |      | OTHER CONTACT INFORMATION (IF DIFFERENT) |          |      |
|----------------------|----------|------|--|----------|------|
| FIRM NAME:           |          |      | OWNER NAME:                              |          |      |
| CONTACT:             |          |      | CONTACT:                                 |          |      |
| ADDRESS:             |          |      | ADDRESS:                                 |          |      |
| CITY:                | STATE:   | ZIP: | CITY:                                    | STATE:   | ZIP: |
| PHONE: ( )           | FAX: ( ) |      | PHONE: ( )                               | FAX: ( ) |      |
| EMAIL:               |          |      | EMAIL:                                   |          |      |

| PROPERTY OWNER CONSENT/AGENT AUTHORIZATION   |               |       |
|--|---------------|-------|
| By my signature, I hereby affirm that I am the property owner of record, or if the applicant is an organization or business entity, that authorization has been granted to represent the owner, organization or business in this application. I certify that the preceding information is complete and accurate, and it is understood that I agree to the development/subdivision of this property.  |               |       |
| Signature:   | Printed Name: | Date: |
| Signature:   | Printed Name: | Date: |
| By signing this form, the owner of the property authorizes Andrews County to begin proceedings in accordance with the process for this type of application indicated on page one of this application. The owner further acknowledges that submission of an application does not in any way obligate the County to approve the application and that although County staff may make certain recommendations regarding this application, the Commissioners' Court may not follow that recommendation and may make a final decision that does not conform to the staff's recommendation. |               |       |

| CALCULATION OF FEES   |   |                      |
|---|---|----------------------|
| PRELIMINARY PLAT:<br>\$500 + ____ lots x \$10 per lot =<br>\$ _____ | PRELIMINARY PLAT IN FLOODPLAIN:<br>\$1000 + ____ lots x \$10 per lot = \$ _____ | FINAL PLAT:<br>\$100 |

| RECEIPT BY ANDREWS COUNTY (Office use only)  |   |
|--|---|
| Date Application Received: ____ / ____ / 20 ____   | Date Application Accepted/Rejected: ____ / ____ / 20 ____ |
| Signature:   | Signature:  |
| Receipt of this application by Andrews County does not provide confirmation or acceptance of a complete application, nor does it waive requirements for any additional information not contained as part of this application which may also be needed as a part of the review process. |   |

If an agent is authorized by the property owner to file and execute the application on behalf of the property owner, the agent must complete the affidavit below.

STATE OF TEXAS  
COUNTY OF ANDREWS

Before me, the undersigned authority, on this day personally appeared \_\_\_\_\_ who, being by me duly sworn, upon oath says: That (s)he is authorized by \_\_\_\_\_, the owner of the above described property, to fully represent him/her in this application and that (s)he had the legal right, power and authority to sign said owner's name hereto as his/her attorney in fact.

\_\_\_\_\_  
Authorized Agent (signature)

Subscribed and sworn to before me, this \_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_, to certify which witness my hand and seal of office.

\_\_\_\_\_  
NOTARY PUBLIC, ANDREWS COUNTY, TEXAS