



Planning Department
 201 1st Avenue East
 Kalispell, MT 59901
 Phone: (406) 758-7940
 Fax: (406) 758-7739
www.kalispell.com/planning

MINOR SUBDIVISION PRELIMINARY PLAT APPLICATION

FEE SCHEDULE:

FEE ATTACHED: _____

Minor Subdivision...(5 or fewer lots)	\$400 + \$125/lot
Mobile Home Parks & Campgrounds (5 or fewer spaces - land is not subdivided)	\$400 + \$125/space
Amended Preliminary Plat	
Amendment to Conditions Only	\$400 base fee
Re-configured Proposed Lots	Base fee plus \$40/lot
Add Additional Lots or Sublots	Base fee plus \$125/lot
Subdivision Variance	\$100 (per variance)
Commercial Subdivisions	\$1000 + \$125/lot

SUBDIVISION NAME: _____

OWNER (S) OF RECORD:

Name _____ Phone _____
 Mailing Address _____
 City _____ State _____ Zip _____

TECHNICAL/PROFESSIONAL PARTICIPANTS (Surveyor/Designer/Engineer, etc.):

Name & Address _____
 Name & Address _____
 Name & Address _____

LEGAL DESCRIPTION OF PROPERTY:

City/County _____
 Street Address _____
 Assessor's Tract No.(s) _____ Lot No(s) _____
 1/4 Sec _____ Section _____ Township _____ Range _____

GENERAL DESCRIPTION OF SUBDIVISION:

Number of Lots or Rental Spaces _____ Total Acreage in Subdivision _____
 Total Acreage in Lots _____ Minimum Size of Lots or Spaces _____
 Total Acreage in Streets or Roads _____ Maximum Size of Lots or Spaces _____
 Total Acreage in Parks, Open Spaces and/or Common Areas _____

PROPOSED USE(S) AND NUMBER OF ASSOCIATED LOTS/SPACES:

Single Family _____ Townhouse _____ Mobile Home Park _____
Duplex _____ Apartment _____ Recreational Vehicle Park _____
Commercial _____ Industrial _____ Planned Unit Development _____
Condominium _____ Multi-Family _____ Other _____

APPLICABLE ZONING DESIGNATION & DISTRICT _____

ESTIMATE OF MARKET VALUE BEFORE IMPROVEMENTS _____

IMPROVEMENTS TO BE PROVIDED:

Roads:Gravel _____ Paved _____ Curb _____ Gutter _____ Sidewalks _____ Alleys _____ Other _____
Water System: Individual _____ Multiple User _____ Neighborhood _____ Public _____ Other _____
Sewer System: Individual _____ Multiple User _____ Neighborhood _____ Public _____ Other _____
Other Utilities: Cable TV _____ Telephone _____ Electric _____ Gas _____ Other _____
Solid Waste: Home Pick Up _____ Central Storage _____ Contract Hauler _____ Owner Haul _____
Mail Delivery: Central _____ Individual _____ School District: _____
Fire Protection: Hydrants _____ Tanker Recharge _____ Fire District: _____
Drainage System: _____

PROPOSED EROSION/SEDIMENTATION CONTROL: _____

VARIANCES: ARE ANY VARIANCES REQUESTED? _____ (yes/no) If yes, please complete the information below:

SECTION/REGULATION OF REGULATIONS CREATING HARDSHIP: _____

EXPLAIN THE HARDSHIP THAT WOULD BE CREATED WITH STRICT

COMPLIANCE OF REGULATIONS: _____

PROPOSED ALTERNATIVE(S) TO STRICT COMPLIANCES WITH ABOVE

REGULATIONS: _____

PLEASE ANSWER THE FOLLOWING QUESTIONS IN THE SPACES PROVIDED BELOW:

1. Will the granting of the variance be detrimental to the public health, safety or general welfare or injurious to other adjoining properties?

2. Will the variance cause a substantial increase in public costs?

3. Will the variance affect, in any manner, the provisions of any adopted zoning regulations or Master Plan?

4. Are there special circumstances related to the physical characteristics of the site (topography, shape, etc.) that create the hardship?

5. What other conditions are unique to this property that create the need for a variance?

APPLICATION CONTENTS:

The subdivider shall submit a complete application addressing items below to the Kalispell Planning Department at least thirty five (35) calendar days **prior** to the date of the Kalispell City Council meeting at which it will be considered, unless other arrangements have been made with the planning staff.

Submittals shall include:

1. **Completed preliminary plat application.**
2. **4 copies of the preliminary plat.**
3. **Electronic copy** of the application materials submitted, including revised preliminary plat map. Either copied onto a disk or emailed to planning@kalispell.com (Please note the maximum file size to email is 20mg)
4. **One reproducible set of supplemental information.** (See Appendix A of Subdivision Regulations for the city where the subdivision is proposed.)
5. **One reduced copy of the preliminary plat not to exceed 11” x 17” in size.**
6. **A bona fide legal description** of the subject property and a map showing the location and boundaries of the property.
7. **Application fee** per schedule on page 1 of this application, made payable to the City of Kalispell.

I hereby certify under penalty of perjury and the laws of the State of Montana that the information submitted herein, on all other submitted forms, documents, plans or any other information submitted as a part of this application, to be true, complete, and accurate to the best of my knowledge. Should any information or representation submitted in connection with this application be untrue, I understand that any approval based thereon may be rescinded, and other appropriate action taken. The signing of this application signifies approval for the Kalispell Planning staff to be present on the property for routine monitoring and inspection during the approval and development process.

(Applicant)

(Date)