



City of Baytown Plat Application

**Incomplete applications will be returned to applicant. Fold all plats.
Submit 15 copies for all but minor and amending plats.
Minor and Amending plats submit 5.
E-mail a pdf of plat to planning@baytown.org.**

Date _____

Project Name _____

Owner _____

Mailing address _____

Telephone number _____ Email: _____

Agent, Engineer or Surveyor _____

Mailing address _____

Telephone number _____ Email: _____

Survey Name _____ Abstract No. _____

_____ In City of Baytown? _____ ETJ? _____ In Harris County? _____ In Chambers County?

Total acreage _____ # of lots _____ Zoning District _____

Type of Plat: Replat _____ Residential _____ Fire Lane _____ Non-residential _____
Minor _____ Preliminary _____ Amending _____ Final _____
Overall Development _____

Sanitary facilities: City of Baytown system _____ Water District Name _____
Septic Tank _____ Private Utility Company _____

Water Supply: City of Baytown system _____ Water District Name _____
Private Utility Company _____ Individual wells _____

This is to certify that the information on the proposed subdivision is true and correct and that I am the actual owner or authorized agent for the owner of the above described property.

Owner or authorized agent signature

Owner and/or agent's Printed Name

FOR CITY USE:

Fee: _____

PL#: _____

Paid date: _____

Date received by city: _____

Project Manager: _____

Received by: _____