CITY OF RATHDRUM
8047 W Main Street
Rathdrum, ID 83858

PLANNING AND ZONING
208-687-2700 Ext: 117
208-687-1377 Fax

FINAL PLAT APPLICATION & CHECK-LIST
APPENDIX 'C'

Date Received: _____

Fee: _____

APPLICATION INFORMATION

1. Owner_____
   Phone Number: _____
   Address: _____
   _____
   Email: _____

2. Ownership status: Owner:_____ Agent: _____ Tenant:_____ Contract Buyer:_____
   *If applicant is not sole owner, attach listing of name, address and phone number of all vested parties

3. Professional Representative: _____
   Contact Name: _____
   Phone Number: _____
   Address: _____
   _____
   Email: _____

SUBMITTAL DEADLINE:

A *COMPLETE* application with all required submittals must be received by the Planning Administrator at least three(3) weeks prior to the Planning and Zoning Commission meeting date in order to be placed on the agenda.

CERTIFICATION:
I understand that the decision made by the City Council of Rathdrum on a Preliminary Subdivision Plat is final unless appealed by myself, by adjoining property owners, or by other affected persons. I also understand that the Final Subdivision Plat must be approved by the Planning Commission and accepted by the City Council before it can be recorded. All the information, statements, attachments and exhibits transmitted herewith are true to the best of my knowledge. I hereby certify that I am the owner or contract buyer of the property upon which the subdivision is to be located or that I have been vested with the authority to act as agent for the owner or contract buyer.

Owner Signature: _____

FINAL PLAT CHECK LIST:

Please mark a check mark for each item met or N/A for not applicable

Applicant	City Staff		Comments
		Compliance with Preliminary Plat	
		Compliance with Variance	
		County plat –within area of city impact	
		City Plat	
		18" X 27", 3" margin at left, ½" on other ends	
		Four(4) copies of Final Plat	
		Copy of computation sheets	
		North arrow	
		Basis of bearing	
		Scale	
		Date	
		Subdivision name	
		Section	
		Township	
		Range	
		Meridian	Boise
		County	Kootenai
		City	Rathdrum
		State	Idaho
		Legend	
		Vicinity map	
		Easements – width and purpose	
		Lot numbers	
		Block numbers	
		Road right of way widths	
		Road right of way locations	
		Road right of way dedications	
		Road name with correct spelling	
		Bearing and distance of exterior/interior boundary lines	
		Initial point, material, size, length	
		Exterior boundary corners, material size, length	
		Interior lot corners, material, size length	
		Centerline monuments	
		Improvement construction plans approved by city	
		Improvements constructed and approved or 200% surety submitted	
		Description of all monuments-public land survey corners and section subdivision corners	
		No encroachment upon margins of plat	
		Clarity of all lines	
		Mete and bounds legal description of exterior boundary	

		Lot and boundary closures	
		Tie to two public land survey or monuments recognized by the county surveyor/city engineer	
		Copy of corner perpetuation forms on corners used to control subdivision	
		Curve data	
		General notes and details	
		Cul-de-sac and knuckle radius	
		Owner's dedication certificate	
		Company title block	
		Conditions	
		Homeowner's documents	
		Special setback lines	
		Private reservations	
		Notary public	
		Kootenai county surveyor's final plat checklist	
		County surveyor signature block	
		County treasurer signature block	
		County recorder signature block	
		Health district signature block, sanitary restrictions	
		Mayor signature block	
		City engineer signature block	
		City clerk signature block	
		Field check	
		Updated title report demonstrating ownership	
		1 Reproducible mylar, 1 CAD digital drawing diskette, 4 prints submitted after city review	
		Reference to adjoining subdivisions or Records of Survey	

REMARKS:

_____

_____

_____

CHECKLIST COMPLETION AND REVIEW
DESIGN PROFESSIONAL SIGNATURES:

Checked by: _____ Date: _____

Corrections verified by: _____ Date: _____

Approved by: _____ Date: _____

CITY OF RATHDRUM

PLANNING AND ZONING

208-687-2700 Ext: 117

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PROFESSIONAL ASSURANCE – FINAL PLAT

Project: _____

Project Address/Location: _____

Design Professional – Name and Role: _____

_____

As the professional surveyor, engineer or design professional in responsible charge of this project, I certify that the attached subdivision plans submitted to the City of Rathdrum's subdivision plan application and checklist. My stamp and signature indicate the plans were prepared under my responsible charge and in accordance with the standard of care for the profession.

DATED this _____ day of _____ 20____.

Signature

_____