

APPLICATION FOR FINAL PLAT

Albion, Nebraska

LEGAL DESCRIPTION AND GENERAL LOCATION

SE 1/4 Section 21, T20N, R6W,
Boone County, NE

CITY USE ONLY

RECEIPT NO: _____

DATE: _____

PRELIMINARY PLAT #: _____

FEE PAID \$ pd \$350⁰⁰ total

SUBDIVIDER

Name: Dylan Martin

Address: 2609 190th Street
Albion, NE 68620

Telephone: () _____

AGENT (Authorized to act on Subdivider's behalf):

Name: _____

Address: _____

Telephone: () _____

OWNER

Name: Marilee Niewohner

Address: 2609 190th St
Albion, NE 68620

Telephone: () _____

ANY OTHER ASSOCIATES:

Name: _____

Address: _____

Telephone: () _____

NAME OF FINAL PLAT: Marilee 1st Add. NUMBER OF LOTS: 4

a. Does the subdivider have any interest in the land surrounding the preliminary plat? Yes No
If yes, please describe the nature of such interest: _____

b. Will the preliminary plat require any zoning or other action (rezoning, Planned Unit Development, conditional use or vacations) to complete the development? Yes No . If yes please describe the nature of the action: _____

c. The final plat is based upon the preliminary plat for Marilee 1st Add., approved by the City Council on _____, 19____, Resolution No. _____

d. Is the final plat consistent with the approved preliminary plat? Yes No . If not, please explain the proposed changes and the reasons therefor: _____

e. Have all the improvements required by the preliminary plat been completed? Yes No (Please check the Planning Commission's letter indicating the approval of the preliminary plat.) If not, which improvements have not been completed: _____

N/A

licant's Signature: _____

Date: _____

12-11-25

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SUBDIVIDER
Name: Dylan Martin
Address: 2609 190th Street
Albion, NE 68620
Telephone: () _____


AGENT (Authorized to act on Subdivider's behalf):
Name: _____
Address: _____
Telephone: () _____

OWNER
Name: Manile Niewohner
Address: 2609 190th St
Albion, NE 68620
Telephone: () _____

ANY OTHER ASSOCIATES:
Name: _____
Address: _____
Telephone: () _____

NAME OF FINAL PLAT: Manile 1st Add. NUMBER OF LOTS: 4

- a. Does the subdivider have any interest in the land surrounding the preliminary plat? Yes ___ No
If yes, please describe the nature of such interest: _____
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- e. Have all the improvements required by the preliminary plat been completed? Yes ___ No ___ (Please check the Planning Commission's letter indicating the approval of the preliminary plat.) If not, which improvements have not been completed: N/A

licant's Signature:  Date: 12-11-25

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SUBDIVIDER

Name: Dylan Martin

Address: 2609 190th Street
Albion, NE 68020

Telephone: () _____

AGENT (Authorized to act on Subdivider's behalf):

Name: _____

Address: _____

Telephone: () _____

OWNER

Name: Marilee Niewohner

Address: 2609 190th St
Albion, NE 68020

Telephone: () _____

ANY OTHER ASSOCIATES:

Name: _____

Address: _____

Telephone: () _____

NAME OF FINAL PLAT: Marilee 1st Add. NUMBER OF LOTS: 4

a. Does the subdivider have any interest in the land surrounding the preliminary plat? Yes ___ No X
If yes, please describe the nature of such interest: _____

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Name: Dylan Martin

Address: 2609 190th Street
Albion, NE 68620

Telephone: () _____

AGENT (Authorized to act on Subdivider's behalf):

Name: _____

Address: _____

Telephone: () _____

OWNER

Name: Manike Niewohner

Address: 2609 190th St
Albion, NE 68620

Telephone: () _____

ANY OTHER ASSOCIATES:

Name: _____

Address: _____

Telephone: () _____

NAME OF FINAL PLAT: Manike 1st Add. NUMBER OF LOTS: 4

a. Does the subdivider have any interest in the land surrounding the preliminary plat? Yes ___ No X
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licant's Signature: [Signature] Date: 12-11-25