



24-0180

## SUBDIVISION APPLICATION FORM

### City of Jackson, Missouri

**NAME OF SUBDIVISION:** EAST MAIN CROSSROADS COMMERCIAL SUBDIVISION

**DATE OF APPLICATION:** 05/29/2024

**PROPERTY OWNERS:** (all legal property owners exactly as listed on the deed)

Names, Addresses & Phone #s: MICHAEL K & LINDA J. HAYNES  
13275 LAKEWOOD DR.  
STE. GENEVIEVE, MO, 63670

**CONTACT PERSON HANDLING APPLICATION:**

Contact's Name: ASHTON GASKILL

Contact's Mailing Address: 194 COKER LN  
CAPE GIRARDEAU, MO, 63701

Contact's Phone: 573-335-3026

**ENGINEER / SURVEYOR:**

Company Name, Addresses & Phone #: KOEHLER ENGINEERING AND LAND SURVEYING  
194 COKER LN  
CAPE GIRARDEAU, MO, 63701  
573-335-3026

**TYPE OF SUBDIVISION APPLICATION:** (check all applicable items)

☒ Preliminary plat approval

☐ Final plat approval

☐ Minor subdivision approval

☐ Re-subdivision plat approval

**LEGAL DESCRIPTION OF TRACT:** (attach separate page if necessary)

ALL OF LOT NUMBER 2 OF HAYNES ESTATES THIRD, A SUBDIVISION RECORDED IN DOCUMENT 2019-12095, IN THE CITY OF JACKSON, COUNTY OF CAPE GIRARDEAU, STATE OF MISSOURI.

**ZONING:** Indicate the current zoning district classification of the entire tract to be developed (circle all that apply):

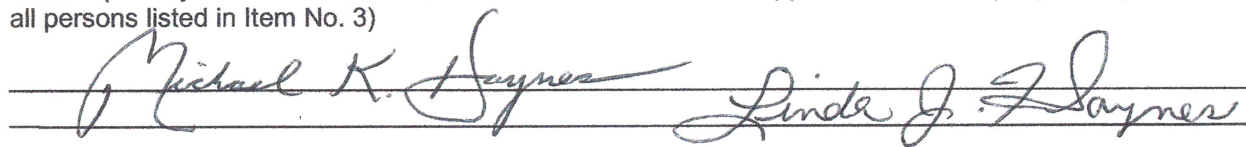
R-1 Single Family Residential  
R-2 Single Family Residential  
R-3 One and Two Family Residential  
R-4 General Residential  
MH-1 Mobile Home Park  
CO-1 Enhanced Commercial Overlay

C-1 Local Commercial  
**C-2** General Commercial  
C-3 Central Business District  
C-4 Planned Commercial District  
CO-1 Enhanced Commercial Overlay  
I-1 Light Industrial  
I-2 Heavy Industrial  
I-3 Planned Industrial Park

Will a rezoning or a special use permit request be submitted in conjunction with the proposed development? YES ☐ NO ☒

**OWNERS' SIGNATURES:**

I state upon my oath that all of the information contained in this application is true. (Original signatures of all persons listed in Item No. 3)

The image shows two handwritten signatures in cursive script. The first signature is "Michael K. Haynes" and the second is "Linde J. Haynes". Both signatures are written over a horizontal line.

Please submit the completed application along with the applicable application fee to:

Building & Planning Superintendent  
City of Jackson  
101 Court Street  
Jackson, MO 63755

Ph: 573-243-2300 ext. 29  
Fax: 573-243-3322  
Email: [permits@jacksonmo.org](mailto:permits@jacksonmo.org)