

SUBDIVISION APPLICATION FORM City of Jackson, Missouri

NAME OF SUBDIVISION:	KIMBELAND PLACE SUBDIVISION
DATE OF APPLICATION:	9-16-2024
Names, Addresses & Phone	legal property owners exactly as listed on the deed) #s: augh and Linda M. Sebaugh, Husband and Wife and, Jackson, MO 63755
CONTACT PERSON HAND	
Contact's Name:	1508 Kimbeland Drive
Contact's Mailing Address:	1508 Kimbeland Drive Jackson, Mo 63755
Contact's Phone:	573-450-1691
ENGINEER / SURVEYOR: Company Name, Addresses	& Phone #: RICHARDS LAND SURVEYING 1813 GREENBRIER DRIVE CAPE GIRARDEAU, MO., 63701 573-339-7473
TYPE OF SUBDIVISION AF	PPLICATION: (check all applicable items)
Preliminary plat approva	Final plat approval
Minor subdivision appro	val Re-subdivision plat approval
LEGAL DESCRIPTION OF TRACT: (attach separate page if necessary)	
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 C-4 Planned Commercial District MH-1 Mobile Home Park CO-1 Enhanced Commercial Overlay CO-1 Enhanced Commercial Overlay I-1 Light Industrial I-2 Heavy Industrial Planned Industrial Park	
Will a rezoning or a special udevelopment?	use permit request be submitted in conjunction with the proposed

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)

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

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

Ph: 573-243-2300 ext. 2029

Fax: 573-243-3322

Email: Imiller@jacksonmo.org