



## SUBDIVISION APPLICATION FORM

### City of Jackson, Missouri

**NAME OF SUBDIVISION:** Terrace Above The Greens Subdivision

**DATE OF APPLICATION:** 6-26-2024

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

Names, Addresses & Phone #s: MHRR LLC, Marshall Trawick  
1410 Wedgewood Dr  
Jackson, MO 63755

**CONTACT PERSON HANDLING APPLICATION:**

Contact's Name: Susan Dodds

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

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

- |   |   |
|---|---|
| <input checked="" type="checkbox"/> Preliminary plat approval | <input type="checkbox"/> Final plat approval          |
| <input type="checkbox"/> Minor subdivision approval           | <input type="checkbox"/> Re-subdivision plat approval |

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

See attached plat

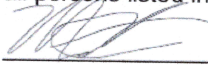
**ZONING:** Indicate the current zoning district classification of the entire tract to be developed (circle all that apply):

- |                                      |                                  |
|--------------------------------------|----------------------------------|
| R-1 Single Family Residential        | C-1 Local Commercial             |
| <b>R-2 Single Family Residential</b> | C-2 General Commercial           |
| R-3 One and Two Family Residential   | C-3 Central Business District    |
| 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             |
|                                      | 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)



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)