



SUBDIVISION APPLICATION FORM

City of Jackson, Missouri

NAME OF SUBDIVISION: Teresa R. Maurer E. Main Subdivision

DATE OF APPLICATION: 01-20-2025

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

Names, Addresses & Phone #s: The Teresa Rosette Maurer Revocable Living Trust
2684 E. Main St.
Jackson, MO 63755

CONTACT PERSON HANDLING APPLICATION:

Contact's Name: Susan Dodds

Contact's Mailing Address: 194 Coker Lane
Cape Girardeau, MO 63701

Contact's Phone: 573.335.3026

ENGINEER / SURVEYOR:

Company Name, Addresses & Phone #: Koehler Engineering and Land Surveying
194 Coker Lane
Cape Girardeau, MO 63701

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)
please see attached

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

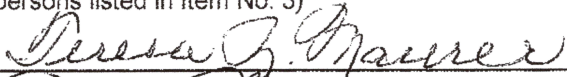
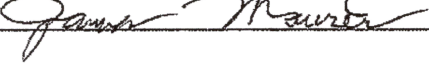
R-1 Single Family Residential
R-2 Single Family Residential
R-3 One and Two Family Residential
R-4 General Residential
MH-1 Mobile Home Park
CO-1 Enhanced Commercial Overlay

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)

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