## Appendix A

Name of Subdivision: Phone Subdivision: Phone Number: 940-841. 3388

## MONTAGUE COUNTY SUBDIVISION PLATTING CHECKLIST FIRST READING (PRELIMINARY)

| YES      | <b>NO</b> | <b>N/A</b> | Name of proposed subdivision.  |
|----------|-----------|------------|--|
| प्       | 0         |            | Name and address of Owner/subdivider/developer.  |
| 9        |           |            | Volume, page and reference names of adjoining owners.  |
| <b>F</b> |           | 0          | Volume, page and reference land use of adjoining owners.   |
|          |           |            | Master Development Plan (if subdivision is a portion of a larger tract.  |
| ď        |           |            | Location map.  |
| 9        |           |            | Scale (not smaller than 1" =200'). If parent tract is larger than 320 acres, scale may be 1" =1,000' w/proposed plat 1" =200'. |
| 9        |           | 0          | North directional arrow.   |
| 9        | 0         | 0          | Contour information - rivers, creeks, bluffs, etc. (no greater than 20' intervals)   |
| •        | 0         |            | Major topographic features.  |
| g        |           | Ð          | Total acreage in subdivision.  |
| 9        |           | 0          | Total number of lots in subdivision.   |
| 9        |           | 0          | Typical lot dimensions.  |
| 9        | 0         |            | Land use of lots, parks, greenbelts.   |
| <u>.</u> | 0         | 9          | Total length of roads.   |
|          |           |            | Width of right-of-way.   |

## PRELIMINARY CHECKLIST (continued)

| 9        |        | 0        | Special flood hazard areas/note.   |
|----------|--------|----------|--|
|          |        | Y        | Road maintenance requested (County/Home Owner's Assn.).                            |
|          | 0      |          | Approval by TxDOT or County for driveway entrance(s).                              |
| <b>d</b> |        |          | Location of wells - water, gas, & oil, where applicable & unused capped statement. |
| ď        |        |          | Plat Application Fees paid. (receipt from County Treasurer required)               |
| V        |        |          | On-Site Sewage Facility Preliminary plan, Inspector's Approval                     |
|          |        | <b>B</b> | Acknowledgement of Rural Addressing / Signage.                                     |
|          | g      |          | Water Availability Study.  |
| <b>V</b> |        | 0        | Tax Certificates and rollback receipts if required.                                |
|          |        |          |  |
|          |        |          |  |
| Signat   | ure of | Reviewe  | Date of Review   |

ADDITIONAL REQUIREMENTS:
ALL ITEMS ON THIS CHECKLIST MUST BE IN THE HANDS OF THE COUNTY
JUDGE'S OFFICE NO LESS THAN THIRTY (30) DAYS PRIOR TO THE
COMMISSIONERS COURT HEARING DATE.