

APPLICATION FOR LAND SUBDIVISION (PLAT)

DATE RECEIVED: _____

CHECK ONE: Preliminary Plat Final Plat Replat Amended Cancellation

1. PROPOSED SUBDIVISION NAME: CARPENTER CORNER ADDITION UNIT NO. _____

LOCATION DESCRIPTION/NEAREST COUNTY ROAD Fm 1537 & CR 3509

ACREAGE _____ NO. OF LOTS: EXISTING _____ PROPOSED _____

REASON(S) FOR PLATTING/REPLATTING sell lots + build homes on

2. OWNER/APPLICANT*: Shannon Carpenter

(*If applicant is person other than owner, a letter of authorization must be provided from owner)

ADDRESS: 1549 Fm 1537 Sul. Spgs., TX 75482

TELEPHONE: 903-439-7666 FAX: _____ MOBILE: same

EMAIL: scarpenterenterprises@yahoo.com

3. LICENSED ENGINEER/SURVEYOR: Datapoint SURVEYING & MAPPING

MAILING ADDRESS: 137 Dabbs St, Sul. Spgs., TX 75482

TELEPHONE: 903-395-6995 FAX: _____ MOBILE: same

EMAIL ADDRESS: Z.MCWEEN@DATAPOINTSURVEYING.COM

4. LIST ANY VARIANCES REQUESTED: N/A

REASON FOR REQUEST (LIST ANY HARDSHIPS): N/A

5. PRESENT USE OF THE PROPERTY: ag

INTENDED USE OF LOTS: (CHECK ALL THOSE THAT APPLY)

RESIDENTIAL (SINGLE FAMILY) RESIDENTIAL (MULTI-FAMILY)

OTHER (SPECIFY) _____

6. PROPERTY LOCATED WITHIN CITY ETJ: _____ YES NO

If yes, Name of City: _____

7. IS ANY PART OF THE PROPERTY IN A FLOODPLAIN? _____ YES NO

WATER SUPPLY: North Hopkins ELECTRIC SERVICE: Oncor

SEWAGE DISPOSAL: septic GAS SERVICE: NA

8. Is the property subject to any liens, encumbrances, or judgments? If so, give details. (Provide separate sheet if needed) Permission from any lien holders and/or removal of any encumbrances or judgments will be necessary prior to filing of said plat with the County Clerk's Office.

9. See platting requirements. All necessary documents to reflect compliance must be complete before application will be deemed complete.

10. I agree to comply with all platting and subdivision requirements of Hopkins County, Texas. I understand that the plat will NOT be forwarded to the Commissioners' Court unless all documentation is satisfactorily filed with the County Clerk's Office correction due date.

Shannon Carpenter
Signature of Owner/Applicant

Shannon Carpenter
Print Name & Title

**If applicant is person other than owner, a letter of authorization must be provided from owner. Signature indicates authorization for plat application and acceptance of waiver statement.

DATE: 6-6-24

FILED
AT 10:28 o'clock A.M.
JUN 11 2024
TRACY SMITH
COUNTY CLERK
HOPKINS COUNTY, TEXAS