



Greene County Planning & Zoning Office  
 940 Boonville, Room 305  
 Springfield, MO 65802  
 417-868-4005 Phone 417-868-4808 Fax

Date Received: _____ Fees Paid: _____ Receipt # _____ MS# _____
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**ADMINISTRATIVE SUBDIVISION APPLICATION**

**PROPERTY OWNER INFORMATION**

Owner's Name (Please Print): \_\_\_\_\_

Owner's Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_ Email: \_\_\_\_\_

**REQUEST**

**Under provisions of Article IV, Sections 13 and 14 of the Subdivision Regulations of Greene County, Missouri, I, \_\_\_\_\_ request that an Administrative Subdivision be approved in order to:**

- Create \_\_\_\_\_ new metes and bounds described tracts of land for building permits and/or transfer of title without platting.
- Approve/Regroup \_\_\_\_\_ land descriptions for building permits and/or transfer of title without platting.

**Sufficient evidence must be submitted to the Planning Director to support the request as required by the Subdivision Regulations in granting approval.**

Authorized Signature of Owner(s): \_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_ Date: \_\_\_\_\_

**ACKNOWLEDGMENT OF PROPERTY OWNER**

STATE OF \_\_\_\_\_ )  
 ) SS.  
 COUNTY OF \_\_\_\_\_ )

On this \_\_\_\_ day of \_\_\_\_\_, in the year \_\_\_\_\_, before me, the undersigned notary public, personally appeared \_\_\_\_\_, known to me to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged that he/she/they executed the same for the purposes therein contained. In witness whereof, I hereunto set my hand and official seal.

\_\_\_\_\_  
 Notary Public

**FOR OFFICE USE ONLY: Mylar Submitted Yes \_\_\_\_\_ No \_\_\_\_\_ Large \_\_\_\_\_ Small \_\_\_\_\_**