



# CITY OF HOLLYWOOD, FLORIDA

## DEPARTMENT OF DEVELOPMENT SERVICES

P. O. Box 229045 · HOLLYWOOD, FLORIDA 33022-9045  
PHONE: (954) 921-3900 · FAX: (954) 921-3416 · WWW.HOLLYWOODFL.ORG

### PLAT AND SUBDIVISION REGULATIONS APPLICATION

**PETITIONER:**

Petition # \_\_\_\_\_

(Please Print legibly or type)

Petitioner's Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number:(\_\_\_\_\_) \_\_\_\_\_ Fax Number:(\_\_\_\_\_) \_\_\_\_\_

Cell Number:(\_\_\_\_\_) \_\_\_\_\_ Alternate Number:(\_\_\_\_\_) \_\_\_\_\_

Email: \_\_\_\_\_

Relationship to Subject Property:  Owner  Agent: \_\_\_\_\_

**SUBJECT PROPERTY:**

Address: \_\_\_\_\_

Legal Description: \_\_\_\_\_

**PURPOSE OF APPLICATION:**

- Plat Amendment/Delegation Request **\$1,005.00**
- Plat **\$2,547.00**
- Vacation of Roads and Easements **\$3,284.00**

**PETITIONER'S STATEMENT:**

The undersigned states that all information given herein and in support of this petition is complete, factual and true.

Petitioner's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Failure to give all necessary information or the giving of false or misleading information shall nullify any action taken by the City in regard to this petition.

**AUTHORIZATION FOR OWNER'S AGENT:**

This is to certify that I am the owner of subject property described in the foregoing application to Plat and Subdivision Regulations and have authorized \_\_\_\_\_ to make and file the aforesaid application.

Owner's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Fax Number:(\_\_\_\_\_) \_\_\_\_\_

Cell Number: \_\_\_\_\_ Alternate Number:(\_\_\_\_\_) \_\_\_\_\_

Email: \_\_\_\_\_

FOR OFFICE USE ONLY

Application received by: \_\_\_\_\_ Date: \_\_\_\_\_

Amount Received: \_\_\_\_\_