City of Batavia
Community Development Department
100 North Island Avenue
Batavia IL 60510
Phone (630) 454-2700

Subdivision Application

Project Information:

Project Name:_____

Project Address/Location:_____

Present Zoning Classification:_____ **[ ] Preliminary Subdivision [ ] Final Subdivision [ ] Both**

Applicant Name: _____

Applicant Address: _____

Applicant Phone:_____ Applicant E-mail:_____

Signature of Applicant: _____Signature Date: _____

Property Owner:_____

Owner Address:_____

Owner Phone:_____ Owner E-mail:_____

Owner Signature*:_____ Signature Date:_____

*A signed letter by the owner authorizing the applicant to apply for Subdivision may be submitted in lieu of signing this form.

Application Information:

- Proposed Subdivision shall conform to Title 10 (Zoning) and Title 11 (Subdivision) of the Batavia Municipal Code
- Provide Six (6) Copies of all submittals (excluding application). Drawing must also be submitted electronically in PDF format
- Application shall include the submittal fee as required by Title 3, Chapter 20 Section 2 of the Municipal Code Applicant is also responsible for reimbursing all applicable recording fees to the City of Batavia.
- Required Attachments:
  - Current Plat of Survey
  - Proposed Plat of Subdivision
  - Verification of Application to the Kane DuPage Soil and Water Conservation District for a Land Use Opinion
- Applicant is required to provide a written notice to properties within 500' (excluding rights of way) and post a sign on the property providing notice of a Public Hearing for the Preliminary Subdivision Plat
- Applicant will provide written affidavits, pursuant to Chapter 5.2 of the Zoning Code for the Mailing (5.205.D.3) and Sign (5.205.C.5) Notices
- Staff may request the applicant provide additional material in order to process and complete application review.
- Submitted Plat of Subdivision shall use the appropriate City of Batavia standardized Certificates and easement language available at www.cityofbatavia.net/Content/templates/?a=2340

Office Use Only:
Filing Date:_____
Approval Date:_____
LAMA Case:_____
Fee Paid:_____