



CITY OF TWIN FALLS

Engineering Department
324 Hansen Street East
P.O. Box 1907
Twin Falls, ID 83303-1907

Phone: 208-735-7248
Fax: 208-736-2293
www.tfid.org

MYLAR SUBMITTAL FORM & CHECKLIST

Date: ___/___/___

Subdivision Name: _____

Contact:

First Name: _____ Last Name: _____

Company: _____ Phone: _____

Address: _____ City: _____ State: _____ Zip: _____

E-mail: _____ Phone: _____ Fax: _____

SUBMITTALS

- One (1) Copy of approved Final Plat on Mylar, 18"x24" in size
 - Parks In-Lieu Contribution payment, if required. Payment amount \$_____
 - Reimbursement payment to City for water and sewer models have been paid
 - Copy of Will-Serve letter from City of Twin Falls
 - Water Shares Certificate
 - Plan Review and Tap Fees Paid
- Select one of the following:**
- Recording prior to completed subdivision construction:
 - Financial guarantee as noted in the Developer's Improvement Agreement
 - Approved & Signed Trust Agreement
 - Recording subdivision with construction completed:
 - Subdivision acceptance from Engineering Technical Inspection
 - Recording subdivision with phased construction:
 - Acceptance of completed portion
 - Financial guarantee for undeveloped portion as noted in the Developer's Improvement Agreement
 - Approved & Signed Trust Agreement

OFFICIAL USE ONLY:

DATE OF SUBMITTAL: _____

ENTERED IN MAGIC: _____

DATE OF ACCEPTANCE: _____

SUBMIT FOR MAYOR'S SIGNATURE: _____

RETURNED TO ENGINEERING DEPARTMENT FOR CITY ENGINEER SIGNATURE: _____

NOTIFY APPLICANT TO PICK UP: _____

RECORDED PLAT RETURNED: _____

SCAN RECORDED COPY AND EMAIL NOTIFICATION TO APPLICABLE ENTITIES: _____