



# CITY OF TWIN FALLS

Engineering Department  
203 Main Ave E  
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Twin Falls, ID 83303-1907

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## CONVEYANCE PLAT APPLICATION

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

Subdivision Name: \_\_\_\_\_

Acreage: \_\_\_\_\_ Number of lots: 2

Type of Plat:  Subdivision Plat  PUD Subdivision Plat  Condominium Plat

Residential  Commercial  Industrial  Mixed Use

If Residential, what type?  Single-Family  Duplex  Townhouse  Multi-Family

### Property Information

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

Subdivision: \_\_\_\_\_

Primary Parcel Number: \_\_\_\_\_

Additional Parcels: \_\_\_\_\_

Zoning District(s): \_\_\_\_\_

Comprehensive Plan Future Land Use Designation: \_\_\_\_\_

### Developer/Applicant Information

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

E-mail: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

### Engineering Firm:

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

E-mail: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

### Owner Information

Same as Applicant?  Yes  No (If yes, leave this section blank)

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

E-mail: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

**SUBMITTALS**

The following items shall be included with the conveyance plat submittal prior to acceptance by the City Administrator. It is the responsibility of the engineering firm to see that all required information is submitted to the City and other concerned agencies in the proper form. Incomplete plans will not be accepted or reviewed.

- Completed Application
- Three (3) copies of the Conveyance Plat, drawn in accordance with requirements- 18" x 24" in size, no part of the drawing being nearer to the edge than one inch (1")
- One (1) Copy of Conveyance Plat, 8 1/2" x 11" in size
- Proof of current ownership of the real property included in the proposed final plat by providing BOTH of the following:
  - o Copy of current Warranty Deed(s)
    - Include Articles of Incorporation if ownership is under a registered name
  - o Copy of current Title/Lot Book report or subdivision guarantee
- Affidavit of Legal Interest
- Lot, plat, boundary, and street closure data
- Weed Management Plan
- If in the Area of Impact:
  - o Approval letter from the Twin Falls Highway District
- Such other information as the Administrator or Commission may deem necessary
- Filing Fee \$ 70.00 payable to the City of Twin Falls  
\$50.00 per plat + \$10.00 per lot

\*\*\*All conveyance plats shall include the following note:  
 "A conveyance plat is a record of property approved by the City of Twin Falls, Idaho, for the purpose of sale or conveyance in its entirety or interests thereon defined. No building permit shall be issued until a final plat is approved, filed of record and public improvements accepted in accordance with the provisions of Title 10 of the City of Twin Falls City code. Selling a portion of this property by metes and bounds, except as shown on an approved, filed and accepted conveyance plat is a violation of City Code."

I understand that:

1. This application is subject to acceptance by the City of Twin Falls upon determination that the application is complete.
2. This application is subject to consideration before the City of Twin Falls City Council.
3. The application fees are non-refundable.

All information, statements, attachments, and exhibits included with this application submittal are true to the best of my knowledge.

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

.....  
**OFFICIAL USE ONLY:**

FEE AMOUNT \$ \_\_\_\_\_ RECEIPT NO. \_\_\_\_\_

CASH                       CHECK NO. \_\_\_\_\_                       CREDIT/DEBIT CARD

DATE OF SUBMITTAL: \_\_\_\_\_

ENTERED IN MAGIC: \_\_\_\_\_

DATE OF ACCEPTANCE: \_\_\_\_\_

CITY COUNCIL HEARING:

NOTIFICATION DATE TO APPLICANT: \_\_\_\_\_

HEARING DATE: \_\_\_\_\_