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SUBDIVISION APPLICATION
Final Plat

Parcel ID# 2041900000002000 S 19 T 18 R 25

Name of Development: RAley MEADOWS

Vicinity of Development: 69Hwy 359 S/E corner

Current Zoning: Ag.

PROPERTY OWNER	APPLICANT (if different than owner)
NAME: Bonnie F. Raley	NAME:
ADDRESS: 9133 W. 359th St. Louisburg, KS 66053	ADDRESS:
PHONE: 913-963-2879 913-963-8647	PHONE:
FAX:	FAX:
EMAIL: JRaley46@yahoo.com	EMAIL:

SURVEYOR / ENGINEER	CONTACT PERSON
NAME: Allenbrand-Drews	NAME:
ADDRESS: 14 W Peoria Paola, KS 66071	ADDRESS:
PHONE: 913-557-1076	PHONE:
FAX:	FAX:
EMAIL: richie@allenbrand-drews.com	EMAIL:

I/we, the (owner(s)/duly authorized agent), do hereby make application to divide the property described with this application.

X *Owner's Signature (all owners must sign):* Bonnie F. Raley *Date:* 10-13-22

Owner's Signature: [signature] *Date:* 4-3-23

****

OFFICE USE ONLY

Date application filed: 4/4/23

PC Hearing date: _____

Fees:
Application amount: $ 440.00 Receipt # 509559

Date Fees Paid: 4/4/23 Application # 23004

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