Date/Time Received: _____ @_____

# Land Use Verification Form

This form must be completed prior to obtaining a driveway or septic permit.

***Applicant:***

Name: _____
Address: _____
City, State Zip Code: _____
Phone: _____

***Please fill out as completely as possible***:

Property Owner: _____
Address: _____
Subdivision: _____Lot #____
Parcel/Tax ID Number: _____

I understand that approval of this form by the Johnson County Planning Department ***does not constitute nor guarantee*** the approval of a building permit for the property specified above. I understand that further subdivisions of this property will invalidate this form.

_____
Signature of Applicant Date

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***Departmental Use Only: Do Not Write Below This Line:***

Zoning: _____ Acreage: _____ Township: _____
Section: _____ Township:_____ Range:_____

___ Parcel is located in Major Subdivision: _____

___ Parcel is located in Minor Subdivision: _____

___ Parcel is a properly split Exempt Subdivision

___ Parcel is an original lot of record

___ Parcel is buildable due to other reasons

**___ The parcel has been created improperly, and <u>CANNOT</u> be issued a permit.**

_____
Signature of Planning Official Title Date