Final Plat Application

City of Battle Ground
Community Development Planning Division
109 SW 1st Street, Suite 127
Battle Ground, WA 98604
Phone: (360) 342-5047 | Fax: (360) 342-5049
www.cityofbg.org

Department Use Only	
Date Received:	
Project File #:	
Receipt #:	**Fee:**

Please refer to Final Plat Transmittal & Submittal Checklist document for submittal requirements.

TYPE OF WORK		
☐ Short Plat	☐ Subdivision	☐ Plat Alteration

PROJECT INFORMATION
Project/Plat name:
Number of Lots:

PROJECT SITE LOCATION
Project address or Tax ID:

PROPERTY OWNER	APPLICANT|CONTACT **	
Name:	Company Name:	Contact Name:
Address:	Address:	
City, State, Zip:	City, State, Zip:	
Phone:	Phone:	
Email:	Email:	

REQUIRED SIGNATURES

I certify, under penalty of perjury, under the laws of the State of Washington, that the foregoing is true and correct. (RCW 9A.72.085). I/we agree that City of Battle Ground staff may enter upon the subject property at any reasonable time to consider the merits of the application, take photographs and post public notices.

Owner's Signature:	**Date:**
Applicant's Signature:	**Date:**

**** THE CONTACT IS THE PARTY RESPONSIBLE FOR SUBMITTAL AND TO WHOM THE REDLINE REVIEWS WILL BE PROVIDED.**

Please be advised that the Washington Uniform Common Interest Ownership Act (WUCIOA), RCW 64.90 may apply.
It is the applicant's responsibility to comply with WUCIOA.