



Physical Address: 401 E Goode / Mailing Address: P.O. Box 1855; Quitman, TX 75783
 Phone: 903-763-2223 / Fax: 903-763-5631

Plat Application

Applicant Information	
Name of Owner/Agent: _____	
Mailing Address: _____	
City: _____	State: _____ Phone: _____
Phone: _____	Email: _____

Surveyor/Engineer Information	
Name of Surveyor/Engineer: _____	Company: _____
Mailing Address: _____	
City: _____	State: _____ Phone: _____
Phone: _____	Email: _____

Property Information	
Total Acreage of Development: _____	Total Number of Lots: _____
Property Location: _____	
Legal Description: _____	
Intended Use of Lots (Check all those that apply):	
_____ Residential (Single-Family)	_____ Residential (Multi-Family)
_____ Other: _____	

Note: The undersigned hereby requests consideration by the City of Quitman, Texas of the above identified plat.

Applicant Signature: _____ Date: _____

OFFICE USE ONLY:

Received By: _____		Date Received: _____	
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