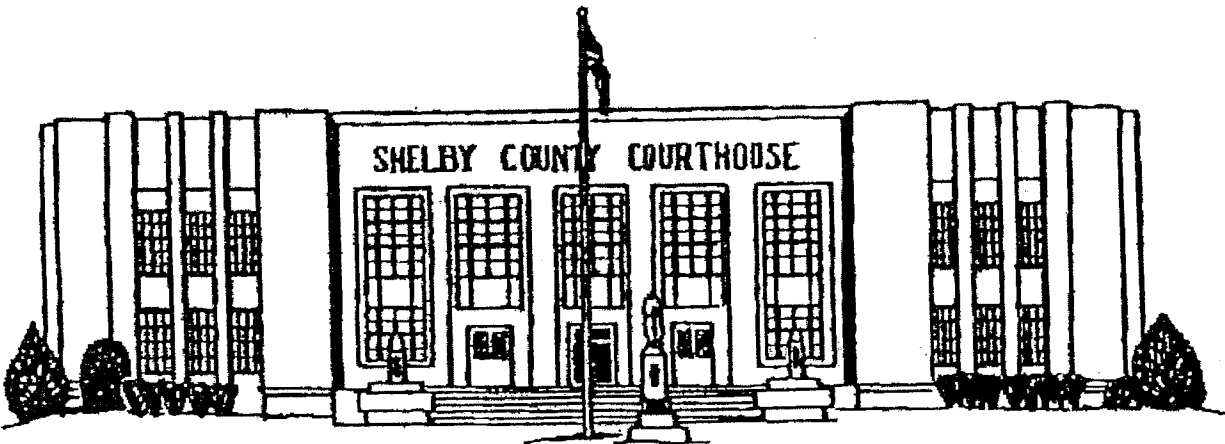


# **SIMPLE SUBDIVISION APPLICATION PACKAGE**



Shelby County Plan Commission  
25 West Polk Street, Room 201  
Shelbyville, IN 46176  
Phone: 317.392.6338  
Fax: 317.421.8365

**[sbooth@co.shelby.in.us](mailto:sbooth@co.shelby.in.us)**

**Samuel R. Booth, Executive Director**

# SIMPLE SUBDIVISION APPLICATION PACKAGE

## GENERAL PROCEDURE

The following is a brief overview of the Simple Subdivision platting process. The complete details of the process are provided in the Shelby County Unified Development Ordinance. The general procedures for Simple Subdivisions are as follows:

## SKETCH PLAN REVIEW

*(Sketch Plan Review is recommended but not required for Simple Subdivisions.)*

1. **Application:** A complete Simple Subdivision Sketch Plan application and required documents are to be submitted to the Plan Commission Director.
2. **Review & Comments:** The Plan Commission Director will provide comments on the proposed subdivision and will advise the applicant (1) what subdivision to file under in the Unified Development Ordinances, (2) to contact any other officials or agencies that must approve certain aspects of the subdivision; and (3) of the procedure, schedule, and standards that will apply to the subdivision.

## PRIMARY PLAT REVIEW

1. **Application:** A complete Simple Subdivision Primary Plat application, including required documents and fees, is to be submitted to the Plan Commission Director.
2. **Docketing:** The Plan Commission Director will place the application on the Plan Commission docket for a hearing after the receipt of the application.
3. **Director Review:** The Plan Commission Director will review the Primary Plat application materials and decide if review by the Plat Review Committee is necessary. If so, it will be placed on the Plat Review Committee agenda. If not, the Primary Plat will proceed to the Plan Commission Hearing.
4. **Plat Review:** The Plat Review Committee will review applications placed on its agenda and either forward them to the Plan Commission or recommend changes and re-submittal. If re-submittal is required, no additional filing fees will be charged, and the Plan Commission Director may assign a new Plan Commission hearing date.
5. **Public Notice:** Notice of Public Hearing must be given in accordance with the Unified Development Ordinance.
6. **Plan Commission Hearing:** The Plan Commission will hold a public hearing on the application, in which they shall consider the application materials, a report from the Plan Commission Director, and testimony from the applicant and any interested parties. The Plan Commission will then make a determination on the Primary Plat.
7. **Determination:** If the Primary Plat is approved, the petitioner may proceed with the Final Plat Review process. The Primary Plat approval will expire 2 years from the date of approval if no application has been made for Final Plat approval.

## FINAL PLAT REVIEW

1. **Application:** A complete Simple Subdivision Construction Plan/Final Plat application, including required documents and fees, is to be submitted to the Plan Commission Director.
2. **Director Review:** The Plan Commission Director will review the Final Plat application materials for consistency with the Primary Plat and to verify that any modifications required by the Plan Commission have been made.
3. **Plan Commission Signing:** After verification by the Plan Commission Director, the Plan Commission Director will have the Plan Commission President and Secretary sign the final plat.
4. **Recording:** It is the responsibility of the applicant to file the approved and signed Final Plat with the Shelby County Recorder within 30 days of the date of signature by the Plan Commission President and Secretary.
5. **Recorded Copy:** The applicant is required to submit a copy of the recorded Final Plat to the Plan Commission Director for the records of the Plan Commission.

## PUBLIC HEARING NOTIFICATION

Notice of Public Hearing for the Plan Commission is to be completed as set forth in the Unified Development Ordinance. The procedures related to public hearings notification contained in this Petition Packet are provided for convenience purposes only.

1. **Legal Notice:** The applicant is responsible for posting a legal advertisement in the newspaper. The legal advertisement must run at least once, at least 10 days prior to the hearing (not including the date of the hearing). The advertisement must be submitted to the newspaper 2 days prior to the desired publication date.
2. **Notice to Interested Parties:** The applicant is responsible for preparing and distributing written notice of the petition (including the same information found in the Legal Notice) to all property owners within 2 ownerships of the boundaries of the subject property. Names and addresses of those property owners should be obtained from the Property Transfer Books contained in the Shelby County Auditor's Office. The notices must be sent at least once, at least 10 days prior to the hearing. Notice may be distributed through regular first-class mail.
3. **Notification Certification:** A copy of the materials provided to each property owner, the completed mailing and/or delivery forms, and a signed and notarized Affidavit of Notice certifying the correctness of the mailing list shall be provided to the Plan Commission Director by the petitioner a minimum of 10 business days prior to the date of the public hearing.

# SIMPLE SUBDIVISION PRIMARY PLAT APPLICATION

Shelby County Plan Commission  
25 West Polk Street, Room 201  
Shelbyville, IN 46176  
P: 317.392.6338 F: 317.421.8365

*For Office Use Only*

Case #: \_\_\_\_\_  
Hearing Date: \_\_\_\_\_  
Fees: \_\_\_\_\_

Approved Denied

## 1. Applicant/Property Owner

### Applicant:

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone Number: \_\_\_\_\_  
Fax Number: \_\_\_\_\_  
E-mail Address: \_\_\_\_\_

### Owner:

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone Number: \_\_\_\_\_  
Fax Number: \_\_\_\_\_

## 2. Applicant's Attorney/Contact Person and Project Designer (if any):

### Attorney/Contact Person:

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone Number: \_\_\_\_\_  
Fax Number: \_\_\_\_\_

### Project Designer:

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone Number: \_\_\_\_\_  
Fax Number: \_\_\_\_\_

## 3. Project Information:

Address/Location of Property: \_\_\_\_\_  
Proposed Name of Subdivision: \_\_\_\_\_  
Area in Acres: \_\_\_\_\_

Current Zoning: \_\_\_\_\_  
Proposed Use: \_\_\_\_\_  
Proposed Number of Lots: \_\_\_\_\_

## 4. Waivers:

Are any waivers to the requirements, standards or specifications of the Unified Development Ordinance being requested?

\_\_ No \_\_ Yes (specify request and Section Number): \_\_\_\_\_

## 5. Attachments:

Please see checklist for detailed information about the required attachments.

- Preliminary Plat  Subdivision Covenants  
 Vicinity Map  Application Fee

The undersigned states the above information is true and correct as (s)he is informed and believes.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

State of Indiana )  
County of Shelby ) SS:

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
Notary Public - Signed

\_\_\_\_\_  
Printed

Residing in \_\_\_\_\_ County My Commission expires \_\_\_\_\_

# SIMPLE SUBDIVISION FINAL PLAT & CONSTRUCTION PLAN APPLICATION

Shelby County Plan Commission  
25 West Polk Street, Room 201  
Shelbyville, IN 46176  
P: 317.392.6338 F: 317.421.8365

<i>For Office Use Only</i>	
Case #:	_____
Hearing Date:	_____
Fees:	_____
Approved	Denied

## 1. Applicant/Property Owner

### Applicant:

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Phone Number: \_\_\_\_\_  
Fax Number: \_\_\_\_\_  
E-mail Address: \_\_\_\_\_

### Owner:

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Phone Number: \_\_\_\_\_  
Fax Number: \_\_\_\_\_

## 2. Applicant's Attorney/Contact Person and Project Designer (if any):

### Attorney/Contact Person:

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Phone Number: \_\_\_\_\_  
Fax Number: \_\_\_\_\_

### Project Designer:

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Phone Number: \_\_\_\_\_  
Fax Number: \_\_\_\_\_

## 3. Project Information:

Address/Location of Property: \_\_\_\_\_  
\_\_\_\_\_  
Proposed Name of Subdivision: \_\_\_\_\_  
Area in Acres: \_\_\_\_\_

Current Zoning: \_\_\_\_\_  
Proposed Use: \_\_\_\_\_  
Proposed Number of Lots: \_\_\_\_\_

## 4. Attachments:

Please see checklist for detailed information about the required attachments.

- Final Plat  Construction Plans  
 Application Fee

The undersigned states the above information is true and correct as (s)he is informed and believes.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

State of Indiana )  
County of Shelby ) SS:

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
Notary Public - Signed

\_\_\_\_\_  
Printed

Residing in \_\_\_\_\_ County

My Commission expires \_\_\_\_\_

**AFFIDAVIT & CONSENT OF PROPERTY OWNER  
APPLICATION TO THE SHELBY COUNTY PLAN COMMISSION**

STATE OF INDIANA )  
COUNTY OF SHELBY ) SS:

I, \_\_\_\_\_, AFTER BEING DULY SWORN, DEPOSE AND SAY THE FOLLOWING:  
(Name of property owner)

1. That I am the owner of real estate located at \_\_\_\_\_;  
(Address of affected property)
2. That I have read and examined the Application made to the Shelby County Plan Commission by:  
\_\_\_\_\_  
(Name of applicant)
3. That I have no objections to, and consent to the request(s) described in the Application made to the Shelby County Plan Commission.

\_\_\_\_\_  
Owner's Name (Please Print)

\_\_\_\_\_  
Owner's Signature

State of Indiana )  
County of Shelby ) SS:

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
Notary Public / \_\_\_\_\_  
Printed

Residing in \_\_\_\_\_ County My Commission expires \_\_\_\_\_

**NOTICE OF PUBLIC HEARING  
BY THE  
SHELBY COUNTY PLAN COMMISSION**

Notice is hereby given that the Shelby County Plan Commission will hold a Public Hearing on \_\_\_\_\_  
(Date of hearing)  
at \_\_\_\_\_ in Conference Room 208A at the Shelby County Courthouse Annex to consider a petition  
(Time)  
by \_\_\_\_\_ to allow the following:  
(Name of applicant)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(Type a brief description of request)

The property is located at \_\_\_\_\_, on the \_\_\_\_\_ side of County Road \_\_\_\_\_  
between County Road \_\_\_\_\_ and County Road \_\_\_\_\_ in section \_\_\_\_ of \_\_\_\_\_ Township and  
also described by the following:

**(INSERT LEGAL DESCRIPTION OF PROPERTY)**

The application may be examined at the office of the Shelby County Plan Commission located in the Courthouse Annex at 25 West Polk Street, Room 201, Shelbyville, Indiana, 46176, Monday through Thursday, between the hours of 7:00 AM and 5:00 PM.

Written comments in support of or in opposition to the Petition may be filed with or mailed to the Plan Commission Director prior to the Public Hearing at the above address or filed with the Plan Commission Secretary at the Public Hearing. Said Public Hearing will be open to the public and any objectors will be heard at this meeting. Hearings may be continued from time to time as may be necessary.

\_\_\_\_\_  
Plan Commission  
Representative

\_\_\_\_\_  
Title

**AFFIDAVIT OF NOTICE TO INTERESTED PARTIES  
PUBLIC HEARING OF THE SHELBY COUNTY PLAN COMMISSION**

STATE OF INDIANA )  
COUNTY OF SHELBY ) SS:

I, \_\_\_\_\_, DO HEREBY CERTIFY THAT NOTICE TO INTERESTED  
(Name of person mailing letters)  
PARTIES OF THE PUBLIC HEARING BY THE SHELBY COUNTY PLAN COMMISSION, to consider the application  
of: \_\_\_\_\_.  
(Name of person on application)

Requesting: \_\_\_\_\_  
\_\_\_\_\_

For Property Located at: \_\_\_\_\_

Was sent to the following owners and addresses as listed in the Plat Books of the Shelby County Auditor's Office (attach additional sheets if necessary):

<u>OWNERS</u>	<u>ADDRESS</u>
_____	_____, _____
_____	_____, _____
_____	_____, _____
_____	_____, _____
_____	_____, _____
_____	_____, _____
_____	_____, _____
_____	_____, _____

And that said notices were sent on or before the \_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, being at least ten (10) days prior to the date of the Public Hearing.

\_\_\_\_\_  
(Name of person mailing the letters)

State of Indiana )  
County of Shelby ) SS:

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
Notary Public / Printed

Residing in \_\_\_\_\_ County My Commission expires \_\_\_\_\_

**REQUEST FOR WAIVER OF THE UNIFIED DEVELOPMENT ORDINANCE  
FINDINGS OF FACT BY THE SHELBY COUNTY PLAN COMMISSION**

Applicant: \_\_\_\_\_

Case #: \_\_\_\_\_

Location: \_\_\_\_\_

Waiver from the Shelby County Unified Development Ordinance Article #: \_\_\_\_\_

Requesting: \_\_\_\_\_

The Shelby County Plan Commission find the following facts:

1. The granting of the waiver **will/will not** (*circle finding*) be detrimental to the public safety, health, and/or welfare because:

\_\_\_\_\_  
\_\_\_\_\_

2. The granting of the waiver **will/will not** (*circle finding*) be injurious to the reasonable use and development of other property because:

\_\_\_\_\_  
\_\_\_\_\_

3. The conditions upon which the request for a waiver is based **are/are not** (*circle finding*) unique to the property for which a waiver is sought and are not applicable generally to other property because:

\_\_\_\_\_  
\_\_\_\_\_

4. Because of the particular physical surroundings, shape, or topographical conditions of the specific property involved, a hardship to the owner **would/would not** (*circle finding*) result if the strict letter of these regulations were carried out because:

\_\_\_\_\_  
\_\_\_\_\_

5. The waiver **will/will not** (*circle finding*) contradict the intent of the Shelby County Unified Development Ordinance or Comprehensive Plan because:

\_\_\_\_\_  
\_\_\_\_\_

Based on the findings described above, the Plan Commission does now **approve/deny** this application. So ordered this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_. (*Circle Plan Commission finding*)

Shelby County Plan Commission

By: \_\_\_\_\_

President

Attest: \_\_\_\_\_

Secretary