



City of Litchfield
126 North Marshall Avenue
Litchfield, Minnesota 55355
Tel (320) 693-7201 Fax (320) 693-9134
www.ci.litchfield.mn.us

TAX PARCEL SPLITTING APPLICATION FORM
Waiver of Subdivision Regulations

A. Applicant Name: _____

B. Applicant Address: _____

C. Property Address: _____

D. Parcel Number & Legal Description: _____

E. Registered Survey From: _____
(You will need a copy of Certificate of Survey in order to record the split with the Meeker County Recorder's Office.)

F. Unnecessary Hardship to Plat: Yes No
If yes, list: _____

G. Interferences with Subdivision Regulations
Will this tax parcel splitting:

- 1. Cause disastrous, disconnected patchwork of plats? Yes No
2. Cause poor circulation of traffic? Yes No
3. Be attractive, orderly, stable and produce a wholesome community environment? Yes No
4. Have adequate municipal services? Yes No
5. Promote safe streets? Yes No

H. Comments: _____

Date of Application: _____

Applicant Signature: _____

Applicant Phone Number: _____

Applicant Email Address: _____