



DEPARTMENT OF PUBLIC WORKS

Parcel Map Review Submittal Application

Date: _____

I, _____, as agent for _____ hereby
submit application for **PARCEL MAP REVIEW** on Assessor's Parcel Number(s) _____

Surveyor's Name: _____ Contact Person: _____

Address: _____

Email: _____ Phone: _____

Owner's Name: _____

Address: _____

Email: _____ Phone: _____

Required at Submittal:

	Five Paper Prints of Parcel Map (folded)		Copy of current title report and recorded easement documents
	\$300.00 Plan Check Fee		Copy of current recorded deed

Potential Conditions: *(Determined by City Ordinance; Owner notified with correction letter)*

	Civil Improvement Plans / Surety-Bond		Drainage Study
	Geotechnical Report		Traffic Study

Required at Recording:

	One original signed mylar map is required for the City. An additional mylar map may be submitted if a copy is desired for the surveyor's files.		Recording fees payable to Clark County Recorder
	Subdivision Guarantee		Beneficiary Statement (if applicable)
	Tax Certification letter		Encroachment Permit (if required)

- Public Works Department Use Only -

Date Accepted: _____

Received by: _____

Check No: _____

Fee Receipt No: _____

CNLV Project #: _____