

COUNTY OF MERRICK, NE
ADMINISTRATIVE PLAT APPLICATION

Sub-Divider or Owner _____

Address _____

Telephone _____

E-mail _____

Location/Address of requested subdivision _____

Legal description of requested subdivision _____

Zoning District _____

of Lots included in Plat _____

Fee \$50.00. Please make check payable to Merrick County Planning & Zoning.

Applicant

Date

Please contact the Zoning Administrator for requirements pertaining to Administrative Plats.
Merrick County Zoning
PO Box 27, Central City, NE 68826
402-604-1357 hcam@hamilton.net