



CITY OF OSHKOSH

SUBDIVISION APPLICATION

Subdivision Application Fee: \$100

Date of Application: _____20____ Date When Work Will be Completed _____20____
Name of Subdivision Owner: _____ Phone Number: _____
Address of Subdivision: _____

Action taken from Zoning Board:

I hereby certify that the above statements are correct and that all work will be done in accordance with the ordinances of the City of Oshkosh, Nebraska.

Applicant

Seller

Zoning Administrator

Approved: _____
James R. Levick, Mayor

Attest: _____
LeAnn Brown, City Clerk

Resolution: Approved or Denied

\$100 Application Fee Paid: _____ or _____
Yes No