

## MICHAEL B. COOPER PARISH PRESIDENT

Revised August 11, 2022

## **Act of Correction/Amendment Application**

| Subdivision Name, Phase: |  |                         |                      |             |  |
|--------------------------|--|-------------------------|----------------------|-------------|--|
| Reason for Act of Cor    | rection/Amendment:   |                         |                      |             |  |
| Applicant Name:          |  |                         |                      |             |  |
| Applicant Address:       |  |                         |                      |             |  |
|                          | Street   | City                    | State                | Zip Code    |  |
| Applicant E-mail:        | (Business)   | (Cell)                  | (Fax)                |             |  |
| Surveyor Name:           |  |                         |                      |             |  |
| Surveyor Address:        |  |                         |                      |             |  |
|                          | Street   | City                    | State                | Zip Code    |  |
| •                        | (Business)   | (Cell)                  | (Fax)                |             |  |
| Surveyor E-man           |  |                         |                      |             |  |
| Please provide the foll  | owing:   |                         |                      |             |  |
|                          | nest to be placed under "Old B<br>- Engineering ( <b>if applicable</b> )   |                         | nmission Agenda sul  | omitted to  |  |
|                          | Act of Correction/Amendment Fee - \$500.00  A 3% processing fee will be added to all credit card/e-check transactions as per STP Ordinance No. 18-3961, effective October 5, 2018. |                         |                      |             |  |
|                          | Correction/Amendment for revice (Word Document)  | iew by Development - En | gineering and the 22 | nd District |  |
| ☐ Applicable sup         | ☐ Applicable supporting documents and/or exhibits  |                         |                      |             |  |
| •                        | at all information provided relacturate and correct and in accurate  |                         |                      |             |  |
|                          | CANT OR DESIGNEE<br>(SIGNATURE)  | DATE                    |                      | _           |  |