



**Public Health**  
Prevent. Promote. Protect.

# Application for Subdivision/Land Development Review

Southwest District Health  
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## Idaho Public Health Districts

Developer/Applicant Name: \_\_\_\_\_ Phone #: \_\_\_\_\_ Fax#: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
Street/P.O. Box \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

E-mail address: \_\_\_\_\_

Name of Subdivision: \_\_\_\_\_

City: \_\_\_\_\_ County: \_\_\_\_\_

Location of Subdivision: \_\_\_\_\_

Legal Description: Township \_\_\_\_\_ Range \_\_\_\_\_ Section \_\_\_\_\_ 1/4 Section \_\_\_\_\_

Parent Parcel Number of Site \_\_\_\_\_

Property Owner (if different): \_\_\_\_\_ Phone #: \_\_\_\_\_ Fax#: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
Street/P.O. Box \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

E-mail address: \_\_\_\_\_

Engineer: \_\_\_\_\_  
Name \_\_\_\_\_ Phone \_\_\_\_\_ License # \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
Street/P.O. Box \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

E-mail address: \_\_\_\_\_ Fax#: \_\_\_\_\_

Surveyor: \_\_\_\_\_  
Name \_\_\_\_\_ Phone \_\_\_\_\_ License # \_\_\_\_\_

### *Land*

Acres \_\_\_\_\_ Total # Lots \_\_\_\_\_ Buildable \_\_\_\_\_ Non-buildable \_\_\_\_\_

Minimum Lot Size in Acres \_\_\_\_\_ Average Lot Size in Acres \_\_\_\_\_

### *Water*

Type of Water:  Private Water  Shared Well (Non-Public)  Public Water System

Water Supply:  Surface Water  Ground Water

If Public Water System, services provided by: \_\_\_\_\_

