

# Golden Gate Highway District No. 3

Commissioners: David Lincoln, Bob Dennis, Fred Sarceda

## LAND SPLIT WORKSHEET

### Applicant To Fill Out.

\$50.00 Application Fee Paid

Yes  No

**1. Name and Address of Property Owner**

_____	( ) _____ - _____
First Last	Phone No:
_____	( ) _____ - _____
Street Address	Cell No:
_____	_____
City State Zip	

### Highway District Office To Fill Out.

**2. Submitted a sketch of proposed LAND SPLIT**  Yes  No

**3. Is this going to be a platted subdivision?**  Yes  NO  
If so then a Conceptual Plan is needed drawn by an engineer.

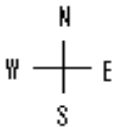
**4. Total number of lots requested:** \_\_\_\_\_

**5. Total number of accesses requested:** \_\_\_\_\_

**6. Work Sheet:**

a. Road Name: \_\_\_\_\_

b. Location: Between \_\_\_\_\_ & \_\_\_\_\_

c.  Side of road



Street Address  
500 Golden Gate Ave  
Wilder, ID 83676

Mailing Address  
Box 38  
Wilder, ID 83676

Phone (208) 482-6267  
Fax (208) 482-6100  
Email goldengate@speedyquick.net

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**Right-of-Way Technician To Fill Out.**

- d. Road surface:     Asphalt     Gravel     Dirt
  
- e. Any shared access:     Yes     No
  
- f. Posted speed limit: \_\_\_\_\_ M. P. H.
  
- g. Is sight distance a factor:     Yes     No
  
- h. Traffic volume:     High     Low
  
- i. Functional classification: \_\_\_\_\_
  
- j. Will culverts be required:     Yes     No

**7. Additional Remarks:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
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\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

District Representative Signature: \_\_\_\_\_

Date: \_\_\_\_\_



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