

**FOUR SEASONS LAKESITES
PROPERTY OWNERS ASSOCIATION, INC.
POLICIES AND PROCEDURES FOR LOT RESUBDIVISION**

- 1) Owner must be a member in good standing to combine lots.
- 2) Assessments for all lots due as of January 1 of each year shall be paid in full and no proration or refund shall be provided to the owner for any lots for the year in which the lots are combined.
- 3) Owner must arrange, at Owner's sole expense, a title report from a Missouri licensed title agent covering all lots to be included on the Resubdivision plat ("Resub plat"). The required title report(s) must be addressed to the POA.
- 4) Owner must arrange, at Owner's sole expense, a plat prepared by a Missouri registered land surveyor showing all lots to be included on the Resub Plat. The required Resub Plat must be titled "Resubdivision of Lots XX, YY and ZZ of *name of subdivision*" and must contain the Owners Certification, Village of Four Seasons Consent (if applicable) and the POA Consent. Sample forms of which are attached hereto. Building setbacks, in accordance with the "Declaration of Restrictive Covenants" and ACC Guidelines, must be shown on the plat. Be aware that lots with waterfront privileges that are combined with lots without waterfront privileges are subject to special waterfront regulations. Contact the POA management office for details. **Owners should submit the preliminary resubdivision plat to the management company for approval as to form prior to obtaining any signatures.**
- 5) A "survey and plat application" must be completed and accompany any resubdivisions outside the Village of Four Seasons but within Camden County. A check made payable to Camden County Planning and Zoning for \$25.00 must be included with this application. The application is included in this packet for your convenience.
- 6) The name of the combined lots shall be designated as "Lot XXR", regardless as to the number of lots combined. That is, the lowest number of the contiguous lots will be used followed by the letter "R".
- 7) Owner shall deliver the title report and, at least, three copies of the completed and signed resubdivision plat to the POA for final approval.
- 8) Owner shall pay the POA the required fee and provide the POA with a separate check payable to the Recorder's Office for the necessary recording fees. The POA will cause the plat to be recorded to ensure the process is completed as anticipated.
- 9) Any costs associated with the replatting of lots will be the expense of the property owner.
- 10) The Owner shall be provided with the recorded information of the Resubdivision plat.

FOUR SEASONS PROPERTY OWNERS ASSOCIATION, INC.
2121 Bagnell Dam Blvd.
Lake Ozark, MO 65049
573-552-8334 • FAX 573-552-8336
REQUEST FOR REPLATTING OF LOTS

DATE _____

APPLICANT _____ TELEPHONE NUMBER _____

APPLICANT'S ADDRESS _____

PROPERTY OWNER _____ TELEPHONE NUMBER _____

PROPERTY OWNER'S ADDRESS _____

ZONING DISTRICT _____

USE _____

LAND TO BE COMBINED:

PARCEL ID No. _____ LOT & SUBDIVISION _____

PARCEL ID No. _____ LOT & SUBDIVISION _____

PARCEL ID No. _____ LOT & SUBDIVISION _____

SIGNATURE OF PROPERTY OWNER

DOCUMENTATION REQUIRED:

Application for re-plat to be submitted to Missouri Association Management, LLC.

3 copies of the Resubdivision Plat

Owner Certification – must be on plat map *

Title Search

Four Seasons POA consent – must be on plat map *

Village of Four Seasons Consent (if applicable) – must be on plat map *

“Survey and Plat Application” for Camden County Planning and Zoning(if applicable) with \$25.00 Fee.

The fee for Camden County Recorder

There is a processing fee of \$300.00 for replatting lots.

* Form must be consistent with the attached examples.

FOR OFFICE USE ONLY:

ACTION: APPROVED DISAPPROVED APPROVED WITH CONDITIONS

CONDITIONS OR COMMENTS: _____

DATE: _____ BY: _____

CONSENT OF VILLAGE OF FOUR SEASONS

The undersigned, duly authorized officers of the Village of Four Seasons, on behalf of said Village of Four Seasons do hereby evidence the approval and consent of this plat "Resubdivision of Lots XX, YY and ZZ of *name of subdivision*").

Trustee

Clerk

Sample
Plat
Notation

CONSENT OF PROPERTY OWNERS ASSOCIATION

The undersigned, being the _____ of the Four Seasons Lakesites Property Owners Association, Inc., a Missouri nonprofit corporation ("Association"), does hereby acknowledge the approval and consent of the Association to this plat, "Resubdivision of Lots XX, YY, and ZZ, of *Subdivision Name*" pursuant to the Fourth Amended and Restated Declaration of Restrictive Covenants recorded in Book 684 Page 544 of the Records of Camden County, Missouri.

IN WITNESS WHEREOF, the said Association has caused this instrument to be signed by its duly authorized officer on its behalf; all done at _____ County, _____, on this ___ day of _____, _____.

FOUR SEASONS LAKESITES
PROPERTY OWNERS ASSOCIATION, INC.

By: _____
Officer Name

STATE OF MISSOURI)
) ss
COUNTY OF)

On this _____ day of _____, _____, before me appeared _____, to me personally known, who, being by me duly sworn, did say that he is the _____ of Four Seasons Lakesites Property Owners Association, Inc., a Missouri Corporation, and that the seal affixed to the foregoing instrument is the corporate seal of said corporation, and that said instrument was signed and sealed in behalf of said corporation by authority of its board of directors, and said _____ acknowledged said instrument to be the free act and deed of said corporation.

Notary Public

My commission expires:

OWNER'S CERTIFICATION

Know all men by these presents, that _____, (*legal status, i.e., Husband and Wife, Missouri Corporation, LLC*), is the sole owner of the above described tract of land and that said _____ has caused said tract of land to be surveyed and caused an amended plat to be prepared thereof in the manner shown on the attached plat, and that said tract of land is to be hereafter known as "Resubdivision of Lots XX, YY, and ZZ, of *Subdivision Name*"

This Resubdivision is accomplished pursuant to the Fourth Amended and Restated Declaration of Restrictive Covenants recorded in Book 684 Page 544 of the Records of Camden County, Missouri.

IN WITNESS WHEREOF, we have hereunto set our hands this _____ day of _____

Owner

Owner

STATE OF MISSOURI)

) ss

COUNTY OF)

On this _____ day of _____, _____, before me appeared _____, to me personally known, who, being by me duly sworn, did say the foregoing instrument was executed by their free act and deed.

Notary Public

My commission expires:

Necessary for Lots Outside the Village of 4 Seasons

CAMDEN COUNTY LAKE AREA PLANNING & ZONING P&Z SUBMITTAL REQUIREMENTS & GENERAL INFORMATION:

NECESSARY ITEMS NEEDED WITH COMPLETED APPLICATION BY DEADLINE:

On Application:

- **Parcel ID Number:** This is on your tax receipt which you receive from the Collector's Office. Planning Department staff can also help you obtain your parcel number.
- **Directions:** To the property from the Hwy 5 & Hwy 54 junction.

With Application Bring:

- **Proof of Ownership:** General Warranty Deed. This can be obtained from the Recorder of Deeds Office (Courthouse, 3rd floor). If you are not the property owner we will also need a notarized Property Owners Authorization Form.
- **Preliminary Plats:** See ULC Appendix A for site plan requirements.
- **Fees:**
 Exempt Survey (Over 20 Acres) & Special Conditions
 Administrative Survey (1 Lot) or Amended Plat \$25.00
 Minor Plat (6 Or Fewer Lots, Minimum 2 acre lots in R-1)) \$25.00
 Preliminary/Final Plat - \$250.00 + \$3.00/Lot
 Replat - \$200.00
 Administrative Plat (10/20 Acres) \$25.00

	DEADLINE 8:30 – 4:30	DECISION HEARING 5:30 PM	COUNTY COMMISSION HEARING 10 AM
PREL./PLAT		YES	
REPLAT		YES	N/A
MINOR PLAT		N/A	N/A
ADM. PLAT		N/A	N/A

*****CUT OFF DATES ARE 30 DAYS PRIOR TO HEARING ON ALL MAJOR PRELIMINARY PLATS.
2 WEEKS PRIOR TO HEARINGS ON MINOR PLATS & ADMINISTRATIVE SURVEYS REQUIRE
PLANNING COMMISSION APPROVAL OR VARIANCE.**

It is recommended that you, or someone represent you, be present at any required hearings.

CAMDEN COUNTY PLANNING & ZONING SURVEY & PLAT APPLICATION

#1 Court Circle, Suite 15
Camdenton, MO 65020

E-Mail: pz@camdenmo.org
Web-site: www.camdenmo.org

Phone: 573-317-3860
FAX: 573-317-9114

* Applicant (s) Name: _____
 * Property Owner's Name (if different): _____
 * Mailing Address: _____
 * City / State / Zip+4: _____
 * Telephone: _____ FAX: _____ Cell #: _____
E-Mail Address: _____
Other Contact Information: _____

* Parcel Identification Number (Tax ID): _____
 * Section (s) - _____ Township - _____ Range - _____
 * Project Site 911 Address (if available): _____
 * Project Acreage - _____ Total Acres of Property - _____
Current Zoning District - _____ Political Township: _____
Current Subdivision Name: _____ Block & Lot Number (s): _____
Directions to the Property: _____

*** REQUIRED INFORMATION FOR APPLICATION TO BE ACCEPTED.**

TYPE OF PROCESS REQUESTED:

FEE:

- | | | |
|-------------------------------------|--|---------------------|
| <input type="checkbox"/> | Preliminary Plat/ Final Plat (# of Lots _____) (Hearing) | \$250 plus \$3/ lot |
| <input type="checkbox"/> | Replat (Hearing) | \$200.00 |
| <input type="checkbox"/> | Minor Plat (6 or Fewer lots) (No Hearing) | \$25.00 |
| <input type="checkbox"/> | Administrative Plat (10-20 Ac.) | \$25.00 |
| <input checked="" type="checkbox"/> | Administrative Survey(1 Lot) or Amended Plat | \$25.00 |
| <input type="checkbox"/> | Exempt Survey (Over 20 Acres) & Special Conditions | |

IMPORTANT – APPLICATIONS MUST INCLUDE TO FOLLOWING TO BE CONSIDERED COMPLETE:

- Completed Application & Application Fee
- Title Report with easement or encumbrance attachments
- Plat or Administrative Survey, with certifications by owner, surveyor, mortgagors, & lien-holders

Applicant's Printed Name

Applicant's Signature

Date

(FOR OFFICE USE ONLY)

(RECEIVED DATE)

RECEIVED BY: _____

APPLICATION FEE: _____

CASE NUMBER: _____

FEE PAID: YES / NO