

APPENDIX D: PLAT APPLICATION

PLAT APPLICATION

SUBJECT PROPERTY INFORMATION	
APPLICATION DATE*: May 20, 2026	RESUBMITTAL: <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
PROJECT NAME: Replat of Woodcrest Sub-Division Addition 1, Lot 13, Block A	
PROJECT ADDRESS OR LOCATION: 9301 & 9305 Duke St., Lumberton, Texas 77657	
IF RESUBMITTAL, PROJECT FORMERLY KNOWN AS:	
NUMBER OF LOTS: 2	TOTAL ACREAGE: 0.335 Acres
JURISDICTION: <input type="checkbox"/> CITY LIMITS <input type="checkbox"/> ETJ <input checked="" type="checkbox"/> OUTSIDE ALL CITY LIMITS AND ETJs	

*This application shall expire five (5) years from the Application date if the project becomes dormant, as defined by Sec. 245.005, Texas Local Government Code, as amended. This application shall expire forty five (45) days from the date the Application is submitted if, after proper notification, the Application remains incomplete, as defined by Sec. 245.002a, Texas Local Government Code, as amended.

TYPE OF APPLICATION		
<input type="checkbox"/> PRELIMINARY PLAT	<input type="checkbox"/> FINAL PLAT	<input checked="" type="checkbox"/> AMENDED PLAT / REPLAT


DIGITAL FILE SUBMISSION	
<input checked="" type="checkbox"/> ADOBE .pdf and <input type="checkbox"/> AutoCAD .dwg to COUNTY ENGINEER	<input type="checkbox"/> ADOBE .pdf and <input type="checkbox"/> AutoCAD .dwg to 911 ADDRESSING

CONTACT INFORMATION					
AGENT INFORMATION			PROPERTY OWNER INFORMATION		
FIRM NAME: Access Surveyors, LLC			OWNER NAME: Adam Kruttlin & Holder Cortes, LLC		
CONTACT: Blythe Hukill			CONTACT: Adam Kruttlin		
ADDRESS: 11025 Old Voth Road			ADDRESS: 2749 US-69		
CITY: Beaumont	STATE: Texas	ZIP: 77713	CITY: Lumberton	STATE: Tx	ZIP: 77657
PHONE: (409) 838-6322	FAX: ()		PHONE: 409-790-8012	FAX:	
EMAIL: rpls5163@aol.com			EMAIL: adam@easttexashomescenter.com		
DEVELOPER INFORMATION			SURVEYOR INFORMATION		
FIRM NAME: Same As Owner			FIRM NAME: Same As Agent		
CONTACT:			CONTACT:		
ADDRESS:			ADDRESS:		

CITY:	STATE:	ZIP:	CITY:	STATE:	ZIP:
PHONE:	FAX:		PHONE:	FAX:	
EMAIL:			EMAIL:		
ENGINEER INFORMATION			OTHER CONTACT INFORMATION (IF DIFFERENT)		
FIRM NAME:			OWNER NAME:		
CONTACT:			CONTACT:		
ADDRESS:			ADDRESS:		
CITY:	STATE:	ZIP:	CITY:	STATE:	ZIP:
PHONE:	FAX:		PHONE:	FAX:	
EMAIL:			EMAIL:		

PROPERTY OWNER CONSENT/AGENT AUTHORIZATION

By my signature, I hereby affirm that I am the property owner of record, or if the applicant is an organization or business entity, that authorization has been granted to represent the owner, organization or business in this application. I certify that the preceding information is complete and accurate, and it is understood that I agree to the development/subdivision of this property.

Signature: 	Printed Name: Blythe Hukill	Date: 05/20/2026
Signature:	Printed Name:	Date:

By signing this form, the owner of the property owner authorizes Hardin County to begin proceedings in accordance with the process for this type of application indicated on page one of this application. The owner further acknowledges that submission of an application does not in any way obligate the County to approve the application and that although County staff may make certain recommendations regarding this application, the Commissioner's Court may not follow that recommendation and may make a final decision that does not conform to the staff's recommendation.

RECEIPT BY HARDIN COUNTY (Office use only)

Date Application Received: ____/____/20	Date Application Accepted / Rejected: __/____/20
Signature:	Signature:

Receipt of this application by Hardin County does not provide confirmation or acceptance of a complete application, nor does it waive requirements for any additional information not contained as part of this application which may also be needed as a part of the review process.