

APPLICATION FOR PRELIMINARY PLAT APPROVAL

DATE: _____

1. Name of Subdivision _____
2. Name of Applicant _____ Phone _____
Address _____
3. Name of Agent (if applicable) _____
Address _____
4. Owner of Record _____ Phone _____
Address _____
5. Engineer _____ Phone _____
Address _____
6. Land Surveyor _____ Phone _____
Address _____
7. Attorney _____ Phone _____
Address _____
8. Subdivision Location: on the _____ side of _____

9. Total Acreage _____ Zone _____ Number of lots _____
10. Tax Map Designation: Section _____ Lot(s) _____
11. Has the Board of Zoning Appeals granted a variance or special exception
concerning this property? _____
If so, list Case No. and name _____
12. Date of sketch plat approval _____
13. Date of preliminary plat approval _____
14. Have any changes been made since this plat was last before the Director of
Planning or the Planning Commission _____

Applicant _____ Date: _____

Reviewed By: _____ Date: _____