

**SUBDIVISION APPLICATION**  
**Final Plat**

Parcel ID# \_\_\_\_\_ S \_\_\_\_\_ T \_\_\_\_\_ R \_\_\_\_\_

Name of Development: \_\_\_\_\_

Vicinity of Development: \_\_\_\_\_

Current Zoning: \_\_\_\_\_

PROPERTY OWNER	APPLICANT (if different than owner)
<b>NAME:</b>	<b>NAME:</b>
<b>ADDRESS:</b>	<b>ADDRESS:</b>
<b>PHONE:</b>	<b>PHONE:</b>
<b>FAX:</b>	<b>FAX:</b>
<b>EMAIL:</b>	<b>EMAIL:</b>

SURVEYOR / ENGINEER	CONTACT PERSON
<b>NAME:</b>	<b>NAME:</b>
<b>ADDRESS:</b>	<b>ADDRESS:</b>
<b>PHONE:</b>	<b>PHONE:</b>
<b>FAX:</b>	<b>FAX:</b>
<b>EMAIL:</b>	<b>EMAIL:</b>

I/we, the (owner(s)/duly authorized agent), do hereby make application to divide the property described with this application.

*Owner's Signature (all owners must sign):* \_\_\_\_\_ *Date:* \_\_\_\_\_

*Owner's Signature:* \_\_\_\_\_ *Date:* \_\_\_\_\_

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OFFICE USE ONLY			
Date application filed:	_____		
PC Hearing date:	_____		
<b>Fees:</b>			
Application amount:	\$ _____	Receipt #	_____
Date Fees Paid:	_____	Application #	_____