

Land Use / Major Subdivision Application

OFFICIAL USE ONLY:	Zoning Dist.:
UDO Number:	Flood Zone:
Date Filed:	Watershed (Y/N):
Application Fee:	Taxes Pd(Y/N):
Stormwater Fee:	LLC current:(Y/N): Received By:

Preliminary Plat

Contact Information		
PROPERTY OWNER AP	PLICANT	AGENT FOR APPLICANT
Name:	Name:	
Address:	Address:	
Telephone:	Telephone:	
Email:	Email:	
LEGAL RELATIONSHIP OF APPLICANT TO I	PROPERTY OWNER:	
DOCUMENTATION OF PROPERTY OWNER GIVING CONSENT TO APPLICANT (Y/N/NA):		
Project/Property Information		
Project Name:		
Physical Street Address		
Landing		
Parcel ID Number(s):		
Deed Book / Page Number and/or Plat Cabinet / Slide Number:		
Parcel ID Number(s):		
Total Parcel(s) & Acreage Total Number of Lots:		
Existing Land Use of Property		
Proposed Use of Property		
Meeting		
Date Community Meeting Held:	Meeting Loc	cation:
Proposed Date of Planning Board Meetin	g:	
Documents to Include with Application		
Preliminary Plat	Consent Affidavit	Deed
Drainage Plan	inage Plan Public and Private Improvements Plan	
Perk Test on all lots to be developed	lots to be developed Development Impact Analysis	

This section for a Description of Project/Narrative (attach separate sheet if needed):		
(ata	e applicant with a Preliminary Plat shall provide a response to each of the following tach separate sheet if needed). Staff shall prepare specific findings of fact based on the evidence omitted. Said findings shall be submitted to Board of Commissioners for their consideration. The use will not endanger the public health or safety.	
	The use will not injure the value of adjoining or abutting lands and will be in harmony with the area in which it is located.	
C.	The use will be in conformity with the Land Use Plan or other officially adopted plan(s).	
	The use will not exceed the county's ability to provide adequate public facilities, including, but not limited to: schools, fire and rescue, law enforcement, and other county facilities. Applicable state standards and guidelines shall be followed for determining when public facilities are adequate.	
bes pro	ne undersigned, do certify that all of the information presented in this application is accurate to the tof my knowledge, information, and belief. Further, I hereby authorize county officials to enter my perty during reasonable business hours for purposes of determining zoning compliance. All ormation submitted and required as part of this application process shall become public record.	
Pro	perty Owner(s)/Applicant* Date	

*Note: Forms must be signed by the owner(s) of record, contract purchaser(s), or other person(s) having a recognized property interest. If there are multiple property owners/applicants, a signature is required for each.