

## APPLICATION FOR MINOR SUBDIVISION

Scottsville-Allen County Planning Commission

***Please Print or Type***

Date of Application: \_\_\_\_\_

Name of Subdivision: \_\_\_\_\_

Location of Subdivision: \_\_\_\_\_

Number of Lots: \_\_\_\_\_

Total Acreage: \_\_\_\_\_ Grid Location: \_\_\_\_\_

*Property Owner Information:*

Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

*Contact Information:*

Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

*Surveyor Information:*

Name: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

THE FOLLOWING ITEMS SHOULD BE ATTACHED (PLEASE CHECK APPROPRIATE CATEGORIES):

1.     4 copies of minor plat signed and dated
2.     Copy of deed to original tract of land or anything after October 1, 1998.

FOR OFFICE USE ONLY

Amount of Fees:    \$ \_\_\_\_\_

Date of Payment: \_\_\_\_\_

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Signature  
PLANNING DEPARTMENT