

# Vonore Planning Commission

## Application for Preliminary Plat of Subdivision

APPLICANT NAME: \_\_\_\_\_

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

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

PROPERTY OWNER NAME: \_\_\_\_\_

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

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

SURVEYOR/ENGINEER NAME: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

### DESCRIPTION OF PROPERTY:

Property Street Address: \_\_\_\_\_

Parcel(s) No.: \_\_\_\_\_ Tax Map No.: \_\_\_\_\_ Size of Tract: \_\_\_\_\_

Current Zoning (if applicable): \_\_\_\_\_

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ATTACH PRELIMINARY PLAT OF LAND PROPOSED FOR SUBDIVISION

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Submitted by:

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date