

**APPLICATION FOR SUBMITTAL
OF
SUBDIVISION FINAL PLAT**

NAME OF PROPOSED SUBDIVISION: _____

LOCATION OF SUBDIVISION: _____

PARCEL ID _____ **ZONING DISTRICT** _____ **TOTAL ACREAGE** _____
NUMBER OF LOTS _____

DEVELOPER:
NAME: _____

ADDRESS: _____

OWNER (if different from above) _____

PHONE: _____

FEE PAID: _____ **DATE:** _____

I (We) _____ as developer(s) of the property to be subdivided have knowledge of the Town's Zoning and Subdivision Ordinances as they pertain to development in the Town of Weddington. I (we) have received a copy of the Subdivision Checklist.

Zoning Administrator

Developer

The Town shall be reimbursed by the subdivider for all costs associated with the Town's engineering and/or consulting services with respect to the review of the final plat prior to final plat approval.

The subdivider shall submit 10 copies of the final plat to the Subdivision Administrator at least 15 days prior to the Planning Board Meeting.