

Subdivision Permit Application

Permit Number: _____

Subdivision Type

____ Exempt ____ Minor ____ Major

Subdivision Details

Total Area: _____ Lots Proposed: _____

Applicant Name: _____

Owner Name: _____

Mailing Address: _____

Mailing Address: _____

Phone No.: _____

Phone No.: _____

Relationship of Applicant to Owner: _____ Contact Email: _____

Property Information – Additional Information may be attached when more than one parcel.

Location: _____ Tax Parcel ID No.: _____

Existing Zoning: _____ Water: __ Well __ Public

Lot Length: _____ Width: _____ Sewer: __ Septic __ Public

Dimensional Requirements:

	Required	Proposed
Lot Area:	_____	_____
Side Yard (L):	_____	_____
Side Yard (R):	_____	_____
Front Setback:	_____	_____
Rear Setback:	_____	_____
Width @Bldg. Line:	_____	_____
Parking Spaces:	_____	_____
Building Height:	_____	_____

Comments:

____ Approved

____ Denied

____ Approved with Conditions

Development Services Director

DATE

Subdivision Permit Application

APPLICATION ATTACHMENTS

In order to be considered complete, the following must accompany each application:

- 1. A Sketch Plan or Preliminary Plat showing proposed subdivision lines, easements, or additional changes proposed.
- 2. A non-refundable submittal fee (in cash or a check made payable) to the Town of Dallas - the following rates shall apply:

_____ \$100 (2-10 lots) _____ \$150 (11-50 lots) _____ \$150 (51-100 lots)

_____ \$2/lot (101-200 lots) _____ \$4/ lot (201+ lots)

Required after Staff Review and Comment for Approval:

A Final Plat prepared by a registered surveyor and drawn to scale not smaller than 100 feet equal to 1 inch, and be minimum of 18 inches by 24 inches in size unless each lot in the proposed subdivision is more than 3 acres in size (See additional requirements in Town of Dallas's Section 152, Subdivision Regulations).

A \$100 filing fee will also be collected at the time of final plat submission.

CERTIFICATIONS

- 1. I HEREBY CERTIFY THAT ALL OF THE INFORMATION PROVIDED FOR THIS APPLICATION IS, TO THE BEST OF MY KNOWLEDGE, ACCURATE AND COMPLETE.

SIGNATURE OF APPLICANT

DATE

- 2. I, _____, OWNER OF PROPERTY _____
Owner Name
Tax Map, Book, and Parcel Number

IN DALLAS, NORTH CAROLINA DO HEREBY AUTHORIZE _____
Applicant's Name

TO SUBMIT THIS ZONING PERMIT APPLICATION TO THE TOWN OF DALLAS ON MY BEHALF.

SIGNATURE OF PROPERTY OWNER

DATE