

OFFICE USE ONLY	
Subdivision #	_____
Date	_____

TOWN OF BLACKSBURG

SUBDIVISION PLAT REVIEW APPLICATION

This application and accompanying information must be submitted in full before the subdivision request can be reviewed by staff or referred to the Planning Commission for consideration. Please contact the Planning and Building Department at (540) 961-1126 for application deadline and questions.

Subdivision Name: _____

- a. Location: _____
- b. Size of Site: _____
- c. Number of Lots: _____

Name of Property Owner(s): _____

Address of Owner: _____ Phone: _____
 Fax: _____

Applicant: _____ Phone: _____
 (to whom comments will be sent) Fax: _____

Project Engineer (if different from applicant): _____

Zoning District of Site: _____

Request Review of:

- Concept Plan _____
 - 2 blue line copies of plat _____
 - No fee required _____

- Preliminary Plat _____
 - Minor Subdivision (1-5 lots) _____
 - 5 blue line copies of plat _____
 - Review fee _____
 - \$500.00 _____
 - Lot Line Adjustment or Easement Plat _____
 - Review Fee \$300.00 _____
 - Major Subdivision (6+ lots) _____
 - 36 blue line copies of plat _____
 - Review fee _____
 - Preliminary Plat Fee \$1000.00 _____
 - Final Plat _____

- 4 blue line copies
- Review Fee \$500.00 _____
- Name and address for adjacent property owners and properties across the street _____
- First class postage costs for mailing notices _____

The application review fee includes two reviews of the submitted application. All reviews required after two will be subject to a \$150.00 review fee to be paid at the time of submission.

SIGNATURE OF APPLICANT: _____

DATE: _____

For official Use Only:

Accepted _____ Rejected _____ Date _____

(The agent must accept or reject application within 15 days)

Reason for rejection _____
