TAZEWELL COUNTY COMMUNITY DEVELOPMENT PRELIMINARY/FINAL PLAT REVIEW APPLICATION

<u>OWNER</u>		DEVELOPER		
Name:		Name:		
Address:		Address:		
City:		City:		
Phone:		Phone:		
Email:		Email:		
		ENGINEER/SURVEYOR:		
	N	ame:		
	A	ddress:		
	С	ity:		
	Р	none:		
	Е	mail:		
Total Acres Number of L	to be Developed: _. _ots - Preliminary F	Average Size/Acreage of Lots: Plat: Number of Lots - Final Plat: Township		
In order to filing the Pl	establish an effic RELIMINARY PLA	ient review process the following information shall be provided at the time of T – Complete the following checklist:		
Present:	Not Present: ☐	Eight (8) large copies of Preliminary Plat & One (1) reduced copy 8 1/2 x 11		
		Name of subdivision which does not duplicate any other in the County		
		Legal description, Township, Zoning Classification, total Acreage		
		Owner name and address		
		Certificate of registered professional engineer or surveyor		
		Scale of drawing & North Arrow, Benchmarks		
		Date of survey		

	Numbered lots & Typical Lot size	
	All existing property lines, section & quarter section lines & existing buildings.	
	Existing streets on and adjacent to the tract: by name, right-of-way width, location, type, width, & elevation of surfacing, curbs, gutters, culverts, and sidewalks.	
	Existing utilities on and adjacent to the tract: location, size, and invert elevation of sanitary sewers, storm sewers, and where existing location and size of water main, location of gas lines, fire hydrants, electric and telephone poles, and street lights: and if any of the above are not available at site, indicate direction and distance to the nearest ones and furnish statement of availability.	
	The type of zoning shall be indicated for surrounding property within 300 foot.	
	Existing grade elevations and all changes proposed thereto: on tract based on USGS datum (United States Geological Survey), showing existing and proposed contours at vertical intervals as follows:	
	1. Slope of 3% or less - one (1) foot interval contour map.	
	2. Slope of over 3% but less than 6% - two (2) foot interval contour map.	
	3. Slope of over 6% - five (5) foot interval contour map.	
	A list of all political and service districts such as fire protection, grade and high school, post office, park, library, etc. shall be shown.	
	All special use areas which will be dedicated, such as parks, ponds, preserves and school lots shall be shown.	
	All watercourses with their high and low water boundaries, all Flood Hazard areas and man-made drainage systems such as ditches and tiles, showing locations and outlets shall be shown.	
	Approval by municipality if the proposed subdivision lies within one and one-half miles of municipal boundary	
	Show locations of all existing wells and septic systems within 100 feet of the boundary and the proposed locations of all wells, septic systems and replacement systems when on-site systems are to be used.	
	Show all easements, location, width and purpose. Drainage easements shall be separate and distinct from utility easements and the two shall not be combined.	
	Show 100 year flood base elevations limit lines.	
	Draft of protective covenants.	
	Show lot lines, number and block numbers & Show location of minimum setback lines.	
	Utilities: location, type & approximate size-May be shown on a separate exhibit.	

Present: □	Not Present:	COPY OF THE SOIL ANALYSIS AS CONDUCTED BY THIS ANALYSIS SHALL ALSO BE PROVIDE DEPARTMENT PRIOR TO SUBMITTAL OF THE FITHE COMMUNITY DEVELOPMENT DEPARTMENT	D TO THE HEALTH			
		Show approximate location of dwellings to be constructed on each lot.				
		Show locations of all vertical closed loop wells.				
The follo		ledges that all the information contained in this applic ect to the best of my knowledge. Further all require				
_	Signature of App	olicant Signature of Owner				
	Date	Date				
Preliminary Plat: \$25.00 per lot with a minimum of \$300.00 and maximum fee of \$1,000.00 to be paid at time of filing Preliminary Plat Final Plat: \$150.00 plus \$25.00 for each lot and a maximum charge of \$1,000.00 due at the time of submitting the Final Plat						
		For Office Staff Use:				
Preliminary Plat:		Final Plat:	Final Plat:			
Date Sub	mitted:	Date Submitted:				
	ry Fee: nid at the time of subm		Final Plat Fee: (To be paid at the time of submittal)			