

# CITY OF CHARLOTTE – PLANNING DEPARTMENT

## SUBDIVISION PLAT APPLICATION

**ALL FEES WILL BE COLLECTED AT THE TIME OF INITIAL APPLICATION**

**A.) PLAN SUBMITTAL TYPE (Check Appropriate Box):**

- ☐ Final Plat (SDFPMA)
 ☐ Revised Final Plat (SDFPMAR)
 ☐ Not Subject To Plat (N/A)
- ☐ Minor Plat (SDFPMI)
 ☐ Final Condominium Plat (SDFPMA)

**B.) SITE INFORMATION:**
**Subdivision Name:** \_\_\_\_\_

**Property Address:** \_\_\_\_\_

**Tax Parcel(s) #:** \_\_\_\_\_ **Zoning:** \_\_\_\_\_ **Rezoning Petition #:** \_\_\_\_\_

*(If applicable)*

<b>Single Family</b> (Detached) or <b>Single Family</b> (Attached) <i>Duplex, Triplex, Quadraplex</i>	<b>Multi-Family</b> <b>Type:</b> _____ <b>(Apt, Townhome, Condo)</b>	<b>Non-Residential</b>
Acreage: _____	Acreage: _____	Acreage: _____
# of Lots: _____ # of Units (if applicable): _____	# of Units: _____	# of Lots: _____ Denuded Acreage: _____

☐ Check if requesting City Solid Waste collection off an alley within a proposed Single Family Development.

**C.) APPLICANT INFORMATION: (Owner of Record or Owner's Duly Authorized Agent) (Print Applicant Information)**
**Property Owner of Record:** \_\_\_\_\_

**\*Applicant Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Applicant Name:** \_\_\_\_\_ **Contact Name:** \_\_\_\_\_

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

(Street Address)

(City, State, Zip)

**Email Address:** \_\_\_\_\_ **Phone #:** \_\_\_\_\_

*\* If applicant signature is not property owner of record, documentation must be attached to application for an authorized agent signature.*
**D.) LICENSE PROFESSIONAL (Architect, Engineer, OR Surveyor):**
**Firm Name:** \_\_\_\_\_ **Contact Name:** \_\_\_\_\_

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

(Street Address)

(City, State, Zip)

**Phone #:** \_\_\_\_\_ **Fax Number:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_ **Professional License #:** \_\_\_\_\_

**E.) CHARLOTTE-MECKLENBURG UTILITIES (CMUD):** Show all water and sewer services precisely on plat. Call 311 to determine water and sewer service locations. Send Final Plat to CMUD – Installation and Development Services – 700 N. Tryon St., Charlotte, NC 28202.

**SEWER**
**WATER**

<input type="checkbox"/> CMUD Public System <input type="checkbox"/> Private System Connecting to CMUD	<input type="checkbox"/> Septic Tank, Private "Package" System <input type="checkbox"/> Other _____
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<input type="checkbox"/> CMUD Public System <input type="checkbox"/> Private System Connecting to CMUD	<input type="checkbox"/> Private Community / Individual Well <input type="checkbox"/> Other _____
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