

CITY OF CHARLOTTE
TENTATIVE APPROVAL OF FINAL PLAT

Name of Project: _____

Location: _____

Owner's Name: _____

Address: _____

(City, State, Zip) (Telephone Number) (Fax Number)

(E-Mail Address)

Date of application submitted for Plat approval: _____

(THE INFORMATION BELOW WILL BE COMPLETED BY CITY STAFF)

CITY ENGINEERING DEPARTMENT:

- () This subdivision complies with the requirements of Sections 8.100 through 8.150 of the City of Charlotte Subdivision Ordinance.
- () This subdivision complies with Section 6.700 of the City of Charlotte Subdivision Ordinance.

City Engineering Department

Date