CITY OF CHARLOTTE

TENTATIVE APPROVAL OF PRELIMINARY SUBDIVISION PLAN

Name of Project:			
Location of Subdivision:			
Owner's Name:			
Address:		(Telephone Number)	(Fax Number)
	(City, State, Zip)	(E-Mail Address)	
Date of application submitt	ed for Preliminary Plan appro	oval:	
CITY ENGINEERING DE	EPARTMENT:		
	nis subdivision is approved for of the City of Charlotte Subdi	r construction and development vision Ordinance.	in accordance with
	City Enginee	ering Department	
	Date		
CHARLOTTE-MECKLEI	NBURG PLANNING DEPA	RTMENT:	
	nis subdivision is approved for otte Subdivision Ordinance.	construction and development	in accordance with all
	Planning Sta	ıff	
	Date		

Note: The approval of this preliminary Subdivision Plan may be appealed within ten days of the date signed by the Planning Department Staff, in accordance with Section 20-87 and 20-88 of the Subdivision Ordinance. This appeal may be initiated by any person aggrieved or by any officer, department, board, or bureau of the City of Charlotte or Mecklenburg County.