

**Division of Land Development**  
**SITE DEVELOPMENT PLAN APPLICATION**

Date Submitted/Accepted

DPZ File No.

**SITE DESCRIPTION**

Project/Subdivision Name

Location

Tax Map No.

Grid/Block No

Parcel No

Street Address and/or Road Name

Election District

Planned Use

Zoning District

Current Deed Reference

Liber

Folio

Date

No. of Lots

No. of Parcels

No. of Units

Type of Unit

No. of Acres

Water

Sewerage

**APPLICANT/CONSULTANT INFORMATION**

**Owner (Fee Simple Only)**

Name

Address

City  State  Zip

Phone  Fax

Email

Contact

**Surveyor/Engineer**

Name

Address

City  State  Zip

Phone  Fax

Email

Contact

**Developer/Contract Purchaser**

Name

Address

City  State  Zip

Phone  Fax

Email

Contact

**Other Consultant**

Name

Address

City  State  Zip

Phone  Fax

Email

Contact

**Certification of Applicant**

I hereby certify that the information supplied herewith is correct and complete and authorize such periodic on-site inspections by the Department of Planning and Zoning and the Subdivision Review Committee agencies as may be necessary to review this application and any waiver petitions filed in connection herewith and to enforce the Subdivision and applicable laws. This right-of-entry shall continue until all administrative appeals pertaining to the property have been exhausted.

**\*If the applicant is the owner's agent, written documentation from the property owner granting that authority is required at the time of the plan submission to DPZ.**

**Signature of Property Owner/Agent**

**Print Name of Property Owner/Agent**

**Date**