

Code Enforcement Officer- Anthony Nevone
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SUBDIVISION APPLICATION

Tax Map Number: _____ Application Fee: \$250.00

Property Owner(s) Name: _____

Address: _____

Contact Numbers: Phone _____ Cell _____

Fax: _____ email : _____

Applicant's Name: _____

Address: _____

General Location of Property: _____

Sub-division Name: _____

Existing Number of Parcels: _____ Proposed Number of Parcels: _____

For Residential Use? _____

Fee Paid by: _____ Amount: _____ Received by: _____

Survey Date: _____ Job Number: _____

PROJECT NARATIVE:

All applications shall be completely filled out and submitted to this office prior to the Planning Board Meeting (held the 2nd Wednesday of the Month)

Applicant Signature: _____

Planning Board meeting date: _____ 20__ 7:00 p.m.

Zoning Board meeting date: _____ 20__ 7:00 p.m.