



## Application for Major Subdivision Review

Department of Neighborhood Development Services

P. O. Box 911, City Hall

Charlottesville, VA 22902

Telephone: (434) 970-3182

**Tax Map and Parcel Number(s)** \_\_\_\_\_

**Address(es)** \_\_\_\_\_

**Number of Existing lots** \_\_\_\_\_ **Number of Proposed lots** \_\_\_\_\_

**Note:** Major subdivisions involve the creation of six (6) or more lots AND/OR the extension of public facilities.

### Applicant Contact Information

Name \_\_\_\_\_

Company \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

### Owner Contact Information

Name \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

### Owner's Signature:

\_\_\_\_\_  
Owner Date

### Required application materials and fee:

- Ten (10) paper copies of the proposed subdivision plat, properly collated and stapled.
- Correct application fee. Checks payable to "City of Charlottesville".

**Note: Incomplete applications will not be processed.**

Date Received: _____	Received by: _____
Fee: _____	Cash/Check # _____