

NO PARTIAL FILINGS WILL BE ACCEPTED

SITECONSTDVLPMTAPP rev 2/16/11

_____ **DETAILED OR CONCEPTUAL DEVELOPMENT PLAN**
_____ **CONSTRUCTION PLAN APPROVAL**
_____ **SITE PLAN APPROVAL**
_____ **SKETCH PLAN**
_____ **RURAL DEVELOPMENT PLAN**

Subdivision Name: _____
Phase/Section/Plat/Continuation Number: _____
Lots Numbered _____ through _____ Township & Section: _____
Area in Acres _____ Zoning _____

Landowner Information	Petitioner Information
Owner name: _____	Petitioner name: _____
Address: _____	Address: _____
Phone Number: _____	Phone Number: _____
Signature of Property Owner(s): _____	
Subscribed and sworn to, before me, a Notary Public, this _____ day of _____, 20____.	
_____	_____
Signature of Notary	Printed Name of Notary
County of Residence: _____	My Commission Expires: _____

Developer Information, if different than landowner	
Name: _____	Address: _____
Printed Name: _____	Phone Number _____
Subscribed and sworn to, before me, a Notary Public, this _____ day of _____, 20____.	
_____	_____
Signature of Notary	Printed Name of Notary
County of Residence: _____	My Commission Expires: _____

Survey/Engineer Information	
Surveyor Name: _____	Address: _____
Phone Number: _____	Fax: _____
Engineer Name: _____	Address: _____
Phone Number: _____	Fax: _____

FOR OFFICE USE ONLY	
Sketch Plan Review & Approval Date: _____	
Preliminary Plat Approval Date (MCPC): _____	
Construction Plan Approval Date: _____	
Tech Review Committee Mtg. Date (for Detail Plan): _____	
Plan Commission Mtg. Date (for Detail Plan): _____	
Board of County Commissioners Approval Date (for Detail Plan): _____	