

PRELIMINARY PLAT APPLICATION

GENERAL INFORMATION

Project Name: _____
Project Address: _____
Map Group/Parcel#: _____
PD Name (if applicable): _____
Existing Structures & Use: _____
Current Zoning: _____ Total Acreage: _____ # of Lots/Units: _____
Minimum Lot Size: _____
Water Provider: _____ Gas Provider: _____
Sewer Provider: _____ Electric Provider: _____

CONTACT INFORMATION

Applicant: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: _____ Email: _____
☐ Contact with Project Updates (Staff Comments, markups, etc.)

Property Owner: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: _____ Email: _____
☐ Contact with Project Updates (Staff Comments, markups, etc.)

Developer: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: _____ Email: _____
☐ Contact with Project Updates (Staff Comments, markups, etc.)

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OFFICE USE ONLY

Project Number:	Case#:
Review Fee: \$	Date Paid:
Cash/Check #:	

HRPC Meeting Date/Approval: _____

☐ HRPC Level

☐ Staff Level

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REQUIRED INFORMATION

The items below are required to proceed with the review process. If the items are not provided, the project may be removed from the agenda.

- **PDF & DWG versions of ALL documents**
- **Preliminary Plat Checklist with each item marked**
- **Application Fee**

I hereby certify that the above information is true, correct, and completed in accordance with the City of Hendersonville, TN Subdivision Regulations and that I have received, or retained, a copy of this application. I certify that I have been informed of the project's meeting/hearing date and hereby waive mailed notice.

I have read and understand Chapter 3.2.8 (Successive Applications) of the Hendersonville Zoning Ordinance, which states that in the event this project is denied, a subsequent application shall not be reviewed or heard unless there is substantial new evidence available, or if a significant mistake of law or of fact affected the prior denial.

Signature of Applicant

Date

Signature of Owner

Date