

POLK COUNTY, NC

35 Walker Street • PO Box 308 • Columbus, NC 28722 • Phone: 828-894-2732 • Fax: 828-894-2913

MINOR SUBDIVISION AND MAJOR SUBDIVISION APPLICATION

PERMIT # _____

1.	APPLICATION TYPE		
	Minor Subdivision (2-8 Lots)		Major Subdivision (9+ Lots) □
	NOTE: A PRE-APPLICATION CONFER PRELIMINARY PLAT FOR A MAJOR S		THE SUBDIVISION ADMINISTRATOR PRIOR TO SUBMITTING THE IS RECOMMENDED.
2.	PROJECT INFORMATION		
	Date of Application		Name of Project
	Location		Property Size (acres)
	Zoning District		Date of Last Subdivision
	Current Land Use		Proposed Land Use
	Tax Parcel Number(s)		Proposed # of Lots
3.	CONTACT INFORMATION		
	Property Owner		
	Address		City, State, Zip
	Telephone		E-mail Address
	Applicant / Agent (Registered Engi	ineer, Designa	er, Developer, Surveyor, etc.)
	Address		City, State, Zip
	Telephone		E-mail Address
	If you have any questions regarding Department at 828.894.2732.	ng these requ	uirements, please contact the Polk County Community Development
	OWNER / APPLICANT SIGNATURE	£	D ATE
	FOR STAFF USE ONLY		
	Permit Number		Flood? Yes ☐ Map # No ☐
	Fee		Watershed? Yes ☐ Map # No ☐
	Zoning District		Location #
	Staff Signature		Date
