

# SUBDIVISION PRE-APPLICATION FORM

Date Received: \_\_\_\_\_

PROJECT NAME (PRINT): \_\_\_\_\_

COMPUTER ASSIGNED PROJECT #: \_\_\_\_\_

OWNER: (PLEASE PRINT)

APPLICANT (PLEASE PRINT)

NAME

NAME

ADDRESS

ADDRESS

CITY, STATE, ZIP

CITY, STATE, ZIP

PHONE NUMBER

PHONE NUMBER

EMAIL ADDRESS

EMAIL ADDRESS

CONTACT PERSON

CONTACT PERSON

\_\_\_\_\_  
SIGNATURE OF OWNER OR AGENT

PROJECT ENGINEER: (PLEASE PRINT)

AGENT (PLEASE PRINT)

NAME

NAME

ADDRESS

ADDRESS

CITY, STATE, ZIP

CITY, STATE, ZIP

PHONE NUMBER

PHONE NUMBER

EMAIL ADDRESS

EMAIL ADDRESS

CONTACT PERSON

CONTACT PERSON

**SEE REVERSE SIDE OF FORM**

1801 27<sup>th</sup> Street, Vero Beach FL 32960

SITE ADDRESS: \_\_\_\_\_

SITE TAX PARCEL ID #(s): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

PROJECT USE (e.g. residential, commercial, industrial): \_\_\_\_\_

\_\_\_\_\_

ZONING: \_\_\_\_\_ FLUE: \_\_\_\_\_

TOTAL (GROSS) ACREAGE OF PARCEL: \_\_\_\_\_

AREA OF DEVELOPMENT (NET) ACREAGE: \_\_\_\_\_

PROPOSED NUMBER OF LOTS: \_\_\_\_\_

PROPOSED DENSITY: \_\_\_\_\_

**\*\* SUBMITTAL CHECKLIST \*\***

	YES	NO
\$300.00 application fee (unless part of PD/PRD)	_____	_____
Completed Pre-application Conference Application Form	_____	_____
Ten (10) Copies of the proposed plat (24" X 36")	_____	_____
Location Map (depicted on proposed plat)	_____	_____