



APPLICATION FOR LOT SPLIT

DATE: _____

1. NAME OF SUBDIVISION (if any): _____

2. NAME OF APPLICANT: _____ PHONE: _____

ADDRESS: _____
(STREET NO. AND NAME) (POST OFFICE) (STATE) (ZIP CODE)

3. NAME OF LOCAL AGENT: _____

ADDRESS: _____
(STREET NO. AND NAME) (POST OFFICE) (STATE) (ZIP CODE)

4. OWNER OF RECORD: _____

ADDRESS: _____
(STREET NO. AND NAME) (POST OFFICE) (STATE) (ZIP CODE)

5. ENGINEER: _____ PHONE: _____

ADDRESS: _____
(STREET NO. AND NAME) (POST OFFICE) (STATE) (ZIP CODE)

6. LAND SURVEYOR: _____ PHONE: _____

ADDRESS: _____
(STREET NO. AND NAME) (POST OFFICE) (STATE) (ZIP CODE)

7. ATTORNEY: _____ PHONE: _____

ADDRESS: _____
(STREET NO. AND NAME) (POST OFFICE) (STATE) (ZIP CODE)

8. SUBDIVISION/PARCEL LOCATION: on the _____ side of _____
(STREET)

_____ feet _____ of _____
(DIRECTION) (STREET)

9. POSTAL DELIVERY AREA _____

10. TOTAL ACREAGE: _____ ZONE: _____ NUMBER OF RESULTING LOTS:

11. TAX MAP DESIGNATION:

SECTION: _____ LOT(S): _____

12. ARE ANY VARIANCES BEING REQUESTED CONCERNING THE LOT SPLIT?

IF SO, DESCRIBE: _____

Attached hereto is an affidavit of ownership indicating the dates the subject property was acquired, together with the book and page of each conveyance into the present owner as recorded in the Chancery Clerk's office. This affidavit shall indicate the legal ownership of the property, the contract owner of the property, and the date the contract of sale was executed.

IN THE EVENT OF CORPORATE OWNERSHIP: A list of all directors, officers, stockholders of each corporation owning more than five percent (5%) of any class of stock must be attached.

STATE OF _____

COUNTY OF _____

I, _____, hereby depose and say that all the above statements and the statements contained in the papers submitted herewith are true.

Mailing Address: _____

Subscribed and sworn to before me this _____ day of _____, 20 _____.

NOTARY PUBLIC

My commission expires: _____.