



Application for Plan Reapproval

This Application is for:				Land Development							
Name of Development											
Location of Property											
Applicant:											
Address							Phone:				
City			State			Zip			Fax:		
Name of Owner											
Address							Phone:				
City			State			Zip			Fax:		
Engineer / Surveyor								Contact:			
Address							Phone:				
City			State			Zip			Fax:		
Total Acreage											
Total Number of Lots				Phases							
Total Lots in Adams				Total Lots out of Adams							
This Phase Number				Number of Lots this Phase							
Total Acreage				Total Acreage this Phase							
Zoning district				Proposed Use							
Are any of the following needed for this submission?											
Zoning Change:				Special Exception:				Conditional Use:			
Variance:											
Describe											
Type of Sewage Disposal				Type of Water Supply							
Explain proposal in detail:											

The applicant certifies that the above information is complete and true and correct to the best of the applicant's knowledge and belief.

Signature: _____ Date: _____

**Applications must be completed and returned to be placed on the agenda.
Plan Reapproval Fee - \$200.00**