



CITY OF MONROE

SUBDIVISION APPLICATION

Note: All the necessary information for subdivision approval as required by the subdivision regulations must be submitted with this application, otherwise, this application will not be considered for approval. Please submit a digital copy of the plat, checklist, and applicable fees.

Subdivision Name: _____

Location: _____

Parcel Number(s): _____

Engineer's Name: _____

Full Address: _____

Telephone Number: _____

Applicant's Name: _____

Full Address: _____ Zip: _____

Telephone Number: _____

Owner's Name: _____

Full Address: _____ Zip: _____

Telephone Number: _____

Area of property, sq. ft. or acres: _____ Number of Lots: _____

Section, Township, Range: _____ Flood Zone: _____

Current zoning if located within the City limits: _____

The undersigned submits the enclosed subdivision plan for Tentative Approval by the City of Monroe Staff.

Done this _____ day of _____, 20____.

Owner or agent of owner-printed

Owner or agent of owner-signature

The following endorsements are required on all plats (see next page):

Certificate of Subdivision Administrator Approval

Approved for recording by the City of Monroe, N.C. Subdivision Administrator pursuant to Chapter 157 of the City of Monroe Code of Ordinances. This plat shall be recorded within thirty days of this date

Subdivision Administrator

Date

Certificate of Ownership and Dedication

I (We) herby certify that I am (we are) owner(s) of the property shown and described herein, that the property is within the Subdivision Jurisdiction of the City of Monroe and that I (we) hereby adopt this plan of subdivision with my (our) free consent and hereby establish all lots and dedicate to the public all streets, alleys, easements, walks, parks and other open spaces as shown hereon unless otherwise noted as private.

Owner

Date

Notarized

Notary Certificate of Surveyor Statement

STATE OF NORTH CAROLINA
COUNTY OF

I, Notary Public in and for the County of _____, and the State of North Carolina, do hereby certify that _____ surveyor, personally appeared before me this day and acknowledged the due execution of the foregoing certificate and upon his oath, swore to the truth of the statements set forth therein.

Witness my hand and notarial seal this _____ day of _____ 20____.

Notary Public

My commission expires _____

SEAL

Review Officer Certification

STATE OF NORTH CAROLINA
COUNTY OF UNION

I, _____, review officer of Union County, certify that the map or plat to which this certification is affixed meets all statutory requirements for recording.

Review Officer

Date

Certificate of Survey and Accuracy

I, _____ certify that this map as (drawn by me) (drawn under my supervision) from (an actual survey made by me) (an actual survey made under my supervision) (a deed description recorded

in Book _____, Page _____, of the Union County Registry) (other); that the error of closure as calculated by latitudes and departures is 1. _____; that the boundaries not surveyed are shown as broken lines plotted from information found in Book _____, Page _____, and that this map was prepared in accordance with G.S. 47-30. Witness by original signature, registration number and seal this _____ day of _____, 20__.

Surveyor

License or Registration Number

(Maximum allowable error: 1:10,000) SEAL

NCDOT Construction Standards Certification

(For all Plats outside City Limits involving new street right-of-way and any plat inside City Limits which changes a State system street)

Department of Transportation

Division of Highways

Proposed Subdivision Road

Construction Standards Certificate

Approved: _____
District Engineer

Date: _____

On-site Water and/or Sewer Note (where appropriate)

Note: (ALL the LOTS) or (LOTS # ____) as shown on this Plat are proposed to be served with on-site water and/or sewer systems. The lots as shown meet the minimum size prescribed by the Union County Health Department for such system(s). However, the recording of this Plat does not guarantee that any such lots will meet the requirements for the approval by the Health Department for such on-site system(s).

Special Flood Hazard Area Note (word to represent actual situation)

Note: (Part of) this property (does) (does not) lie in a Special Flood Hazard Area

Reference: Floodway Panel # _____

Date: _____ (of Panel)

(If part of the property is in a Special Flood Hazard Area it shall be shown graphically on the Plat.)

Statement required for all plats

All zoning information on this plat is shown for illustrative purposes only. Dimensional requirements for all lots in this subdivision should be obtained from the City of Monroe Zoning Administrator.

Notes:

Minor subdivisions include the creation of less than four lots. A *major* subdivision includes the creation of more than four lots, the creation of any new public street, the extension of a public water or sewer system, or the installation of drainage improvements through one or more other lots. All major and minor subdivisions shall require review and approval by the Subdivision Administrator.