

SUBDIVISION APPLICATION

SHELBY COUNTY DEPARTMENT OF DEVELOPMENT SERVICES

(205) 620-6650 - FAX (205) 620-6630

www.shelbyal.com

You must provide the following to submit a complete Subdivision Application.

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| <input type="checkbox"/> Application Form | <input type="checkbox"/> Owner/Family Affidavit(s)-if applicable |
| <input type="checkbox"/> Paper Copies (2) of Detailed Subdivision Plat (24x36) | <input type="checkbox"/> Digital copy of all documents |
| <input type="checkbox"/> Fees will be Invoiced - includes Application Fee and Notifications sent to Adjoining Property Owners | |

NO. LOTS:	NO. ACRES:	Application Date:
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Project Name:

Parcel I.D.:

General Location/Address:

Applicant Name:

Company:

Address:

Preferred Telephone Number:	Cell:
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Email:

Surveyor/Engineer:

Company:

Address:

Telephone:	Cell:
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Email:

Property Owner (if different from Applicant):

Property Owner Contact (phone/email):

If applicant is not property owner a notarized authorization from the property owner must be attached. All communication will be directed to the applicant.

ACKNOWLEDGEMENT

I, the undersigned Applicant, hereby apply for favorable consideration of the Shelby County Planning Commission to subdivide the above-described land as outlined in the plat accompanying this application. Said property is described by the preceding Parcel I.D. and/or attached legal description. I, the undersigned Applicant, understand that payment of these fees does not entitle me to approval of this plat and that no refund of fees will be made. Furthermore, I hereby waive the requirements as set forth in Acts 82-693, 84-454 and 89-673 of the Alabama Legislature, and other provisions of the Code of Alabama (1975), as amended, that the Commission render a decision within 30 days. I, the undersigned Applicant, have reviewed a copy of the applicable subdivision regulations as set forth in the Subdivision Regulations of Shelby County. I understand that this application will not be placed on an agenda and/or scheduled for a public hearing until technical review determines accuracy and completion of maps and documents. I understand that I must be present on the date of the hearing; the Planning Commission may not take action on a case in which there is no one officially representing the property owner(s). Please call 205-620-6650 if you have any questions.

Signed:	Date:
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Print Name:

Office Use Only

CASE NO.:	TENTATIVE MEETING DATE:
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| <input type="checkbox"/> Administrative Subdivision
<input type="checkbox"/> Family
<input type="checkbox"/> Minor Resubdivision/Resurvey
<input type="checkbox"/> Final Minor
<input type="checkbox"/> Final Major | <input type="checkbox"/> Non-Administrative Review - Public Hearing
<input type="checkbox"/> Non-Admin Final/Major Resubdivision
<input type="checkbox"/> Non-Admin Master Plan
<input type="checkbox"/> Non-Admin Preliminary
<input type="checkbox"/> Non-Admin Rural |
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Zoning District:	Received by:
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Bond Required for Final Plat - Date Posted:	Assigned to:
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