
TOWN OF SPARTA PLANNING BOARD
APPLICATION FOR REVIEW OF PRELIMINARY SUBDIVISION PLAT

1. Subdivision name or Identifying Title: _____

2. Applicant's Name: _____

Address: _____

Telephone: (____) _____ - _____

3. Name and address of present owner (if other than #2 above):

Name: _____

Address: _____

4. Interest of Applicant if other than owner: _____

5. Location of proposed subdivision:

_____ (neighborhood or section name) _____ (Street)

_____ (tax map block) _____ (other identification)

6. Number of existing parcel(s): _____; Number of proposed parcel(s): _____

7. Area of existing parcel: _____; area of new parcel being formed: _____

8. Zoning District Classification: _____

9. Intended use for subdivision: _____

10. Names of abutting owners and owners and owners directly across adjoining road(s):

11. Name and profession of person designing Preliminary Plat:

Name: _____

Profession: _____

Address: _____

Telephone: _____

**TOWN OF SPARTA PLANNING BOARD
APPLICATION FOR APPROVAL OF FINAL SUBDIVISION PLAT**

1. Name or Identifying Title _____
2. Applicant's Name _____
3. Address _____ Telephone: _____
4. List changes which result from the Public Hearing: _____

5. Does the Final Subdivision follow the Preliminary Plat? ____
If not, indicate changes. _____
6. Number of parcels proposed for final approval: ____
7. List of maps and other material accompanying application:
 - a. 1 Transparent (Mylar) copy of the Plat.
 - b. 3 Black on white prints.
 - c. ____ Construction detail sheets
8. General Remarks: _____

Applicant's Signature _____

Date: _____