

**ENGINEERING DRAWING
APPLICATION FORM**

Project Name: _____ Date: _____
Number of Lots: _____ Fee Amount: _____ (\$50/lot) Rec'd By: _____

Applicant Information

Legal Owner(s) of Subject Property: _____

Mailing Address: _____

Phone: _____ Cell: _____ Fax: _____

Applicant: _____
(if different than owner)

Mailing Address: _____

Phone: _____ Cell: _____ Fax: _____

Contact Person: _____
(if different than owner)

Mailing Address: _____

Phone: _____ Cell: _____ Fax: _____

Property Information

Street Address of Property: _____

Zoning: _____ Preliminary Plat Approval: _____

Geotechnical Engineer: _____ Contact #: _____

Traffic Engineer: _____ Contact #: _____

Drainage Engineer: _____ Contact #: _____

Project Engineer: _____ Contact #: _____

AutoCAD CD of Site Plan:

Review Checklist: Complete Incomplete