

Planning Department 200 North Center Street Goldsboro, NC 27530 (919) 580-4333

## **SUBDIVISION PLAN APPLICATION**

For Office Use Only:					
Application Number:	Date Submitted:				
Fee Paid Yes No	Cash Check Credit Card				
Application Fees – Check Appropriate B	Box				
\$100.00	Exemption / Minor				
\$200.00 + \$5.00 per lot	Preliminary - Requires Council Approval				
\$150.00 + \$5.00 per lot	Final				
	ion Plan must be submitted along with the applicable fee and information ncluded on the site plan shall meet or exceed requirements contained n Requirements" checklist.				
Name of Development:					
Property Location/Address:					
Zoning: Number of Lots:	Total Acreage:Frontage: Depth:				
Propose Use (Single-family, Multifamily Wayne Co. PIN #:	y, etc.):				
Applicant (print):					
Applicant Address:	City,State,Zip				
Applicant Phone:	Applicant Phone:Applicant Email:				
Owner (print):					
Owner Address:	City,State,Zip				
Owner Phone:	hone:Owner Email:				
Surveyor/Site Designer (print):					
Surveyor/Site Designer Address:	City,State,Zip				
urveyor/Site Designer Phone:Surveyor/Site Designer Email:					
SIGNATURES REQUIRED					
Applicant – Printed	Applicant Signature Date				
Owner – Printed (Notarized Owner Authorization form re	Owner Signature Date required)				
Surveyor/Site Designer – Printed	Surveyor/Site Designer Signature Date				





## CITY OF GOLDSBORO OWNER'S AUTHORIZATION

IF the owner(s) of this subject property are giving authorization for someone else to apply for an application with the City of Goldsboro, for any of the following City of Goldsboro applications:

Please check the applicable box(es):			
Rezoning	Site Plan	☐ Board of A	djustment - Variance
Subdivision	Conditional Use	e Permit Home Occu	pation Permits
This authorization must be comple	ted and submitted	d at time of application.	I/(WE)
		do(es) hereby	certify that I/(WE)
(Name of owner(s)	of subject propert	ry)	
am/(are) the Owners of the proper		•	ify that I/(WE) have
given authorization to the followin	g person and/or o	corporation:	
		to sul	omit an application
(Name of Company and Aut	:horized Represen	tative)	
to the City of Goldsboro, NC for My	//(OUR) property	as listed below.	
Wayne County Parcel Identification Number(s)		Property Address:	
Property Owner – Print		Property Owner Signat	ure Date
NOTARY STATEMENT Sworn to and subscribed before me	the day.	of 20	
Notary Public in and for the State of	·	County of	
l,	_	, Notary Public, do here	eby certify that
	(name of ind	lividual(s) personally appe	ared hefore me this
day and acknowledged the due exe			
seal thisday of, 20_		going matrument. Withest	striy riana ana omelar
seal tills day of, 20_	·		
Official Signature of Notary		Notary printed or type	 d name
		, p	
SEAL		My commission expire	··
JLAL		iviy commission expire:	J