Submission Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature Accepting submittal: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Subdivision Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please check all that were submitted:

* - Completed
* - Not Included

**N/A**- Not Applicable

# Public Works

\_\_\_ 3 Hard Copies of Plans Signed and Sealed (electronic copy in times of COVID)

\_\_\_ 2 Drainage Report Signed and Sealed

\_\_\_\_ Topographic Survey

\_\_\_ Lighting Plan

\_\_\_ Projects 50 Lots or 5 Acres within FEMA Flood Zone A, BFE established with Hydrologic

& Hydraulic Study. CLOMR started and submitted.

\_\_\_ Projects less than 50 lots or 5 acres within FEMA Flood Zone A BFE must be established

with Hydrologic & Hydraulic Study or 3’ above highest adjacent grade.

\_\_\_\_Geotechnical data with seasonal high ground water table established.

\_\_\_ Data must be collected within the last 2 years.

\_\_\_ Copies of all required Federal & State permits.

\_\_\_\_ Copy of Pre-Plat.

Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# Utilities

\_\_\_

Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# Planning and Zoning

\_\_\_

Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# Fire Department

\_\_\_ Auto turn for Fire Trucks, WB-50 model.

\_\_\_ Hydrants - residential every 600’. Commercial every 500’

\_\_\_ Dead end roads no greater than 150’ without an approved turnaround, 96’ diameter for cul-de-sacs.

\_\_\_ Two means of vehicular egress on high density apartment complexes.

Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# Costs

Check Amount:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_