TOWN OF ELLENDALE APPLICATION FOR MINOR OR MAJOR SUBDIVISION PLAN REVIEW

Date:	Application Number:
Name of Subdivision:	Tax Map Number:
Location:	
Existing Zoning:	<u> </u>
Copies of Plan:	Copy of Deed Restrictions:
Copy of Deed or Sales Contract:	
Name, Address & Phone # of Owner:	Name, Address & Phone # of Applicant:
Name, Address & Phone # of person res	sponsible for preparing plan:
Site Data:	
Subdivision Acreage In:	
Lots:	Streets:
Open Space:	Residual Land:
Total Gross:	Number of Lots:
Lots Per Acre:	Minimum Lot Size:

Type of Streets:	
Type of Sewage Disposal:	
	Receipt Number:
Final Plan Fee: \$	Receipt Number:
I, the undersigned, hereby certify this requirements of <u>The Town of Ellendal Regulations</u> adopted November 1, 200	
of Ellendale Zoning Ordinance adopted zoning compliance approval the applic Assessment and Building Code Depart The applicant is responsible for full con	ews applications for compliance with The Town d November 1, 2005. Subsequent to Town ation must go to the Sussex County Division of ment for International Building Code review. mpliance with applicable codes and ordinances ion of governing codes or ordinances shall be applicant.
Signature of owner or applicant:	
Date:	