

Subdivision Application

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Updated MAY 2024

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NOTICE TO APPLICANT			
This application will not be processed until the following items are submitted:			
☐ Filing fee (checks payable to: City of Pooler)☐ Four (4) sets of plans:			
Preliminary plan - refer to Appendix B, Section 702			
Final plat - refer to Appendix B, Section 703 Required neighborhood grading and drainage plan (Amendment 10-03-06)			
 List of adjacent property owners with mailing addresses (minor and major subdivision) Authorization of property owner signed, dated, and notarized (if agent) 			
Copy of current tax bill showing payments or documentation certified by the City of Pooler Plat indicating where subdivision is proposed to take effect, in respect to the nearby			
public roads in common use			
Under Contact Information, addresses and telephone numbers do not have to be repeated if already provided. Staff correspondence will be sent to one designated contact person, not all listed.			
OFFICE USE ONLY			
File Number: Date Filed:			
Planning & Zoning Commission: Approved Denied Remarks:			
Mayor & Council: Approved Denied Remarks:			
Recorded Plat Date: Book: Pages:			
Subdivision Type (check all that apply)			
☐ Recombination ☐ Minor Subdivision ☐ Major Subdivision ☐ Revised Plat ☐ Final Plat ☐ 5-Acre Trac			
Contact Information			
Owner/Authorized Agent Neme			
Owner/Authorized Agent Name Phone			
Property Address Email			
Mailing Address (if different)			
Have any previous applications been made for a subdivision affecting these same premises? \square No \square Yes			
If yes, date: If yes, action taken:			



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ction Requested		
Property Location (area, stre	PIN	
Property Legal description (subdivision, block, lot number)		Total Area (acres or sq ft
Existing Land Use (specify, s	uch as grocery store, single family residents,	vacant land, etc.)
Proposed Land Use for Each	Parcel (specify, such as grocery store, single f	amily residents, vacant land, etc.)
Reason(s) for Subdivision Re	equest Which Support the Purposes of the Zon	ing Program
Indicate Lot Type: ☐ For Sa	le 🗌 For Rent 🔲 Combination:	% For Rent
Affidavit		
	nat I have read, examined, and completed this application is true and correct.	application and certify that all the
Applicant Name	Applicant Signature	Date
Attestant Name	Attestant Title	Date