



PCR # \_\_\_\_\_

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

**CITY OF WILLIAMSBURG  
APPLICATION FOR  
SUBDIVISION DEVELOPMENT PLAN REVIEW**

401 Lafayette Street  
Williamsburg, VA 23185-3617  
(757) 220-6130 FAX: (757) 220-6130

Applicant \_\_\_\_\_  
Address \_\_\_\_\_  
City, State, Zip \_\_\_\_\_  
Phone/Fax Number \_\_\_\_\_  
Email \_\_\_\_\_

Owner \_\_\_\_\_  
Address \_\_\_\_\_  
City, State, Zip \_\_\_\_\_  
Phone/Fax Number \_\_\_\_\_  
Email \_\_\_\_\_

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Representative \_\_\_\_\_  
City, State, Zip \_\_\_\_\_  
Email \_\_\_\_\_

Address: \_\_\_\_\_  
Phone/Fax Number \_\_\_\_\_

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Location of Request \_\_\_\_\_  
Tax Map Number \_\_\_\_\_ Zoning \_\_\_\_\_  
Proposed Lots \_\_\_\_\_ Proposed Use \_\_\_\_\_

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I/We, as (Owner) (Contract Purchaser with Owner's Written Consent) (Owner's Agent) of the property mentioned above, hereby petition the Planning Commission to approve the above described subdivision development plan.

\_\_\_\_\_  
Signature of Owner

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name of Owner

Sworn before me this \_\_\_\_ day of \_\_\_\_\_, 20\_\_

\_\_\_\_\_  
Notary

\_\_\_\_\_  
Commission Expiration

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Statement by Applicant:

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Site Plan Review Committee Date:

\_\_\_\_\_  
Date

Site Plan Review Committee Recommendation:

\*\*\*\*\*  
Subdivision Development Plan Approval Date:

\_\_\_\_\_  
Date