Application for Approval of Sketch Plan

File one completed form with the Planning Board and one copy with the Town Clerk.

Date Ti	ransmitted:
Date of next Planning Board meeting: (presumed "Submittal" date)	
To the	Planning Board of Chocowinity:
	dersigned herewith submits the accompanying Sketch Plan of a subdivision entitled for approval under the provisions of your Rules and
Regula	tions covering the Subdivision of Land.
1.	Name of Applicant:
	Address: Phone:
2.	Name of Owner (if not Applicant):
	Address: Phone:
3.	Name of designer:
	Address: Phone:
4.	Deed of property recorded in Beaufort County Registry, Book, Page
5.	Location and Description of Property:
6.	Number of lots on the plan:
Signati	ure of Applicant:
Signature of Owner (if not Applicant):	