



COMMONWEALTH OF VIRGINIA  
**COUNTY OF CUMBERLAND**

**Internal Use Only**

FILE # \_\_\_\_\_  
 RECEIVED \_\_\_\_\_  
 COMPLETED \_\_\_\_\_  
 FEE/Ck. # \_\_\_\_\_  
 RECEIPT # \_\_\_\_\_  
 STAFF: \_\_\_\_\_

**Final Plat Review**

Form must be completed in ink.  
 Last revised: 9/21

**1. Type of development:** (check appropriate boxes)

Type	Description	Info Required
<input type="checkbox"/> <b>Minor</b>	<u>Includes:</u> <input type="checkbox"/> By-right division (division producing up to 5 lots)  <input type="checkbox"/> family division (1 lot per immediate family member)	→ Deed/survey showing tract → Final plat (see sec. 54-59 and 54-58 if applicable)  → Copy of deed showing restrictive covenant → Final plat (see sec. 54-58)
<input type="checkbox"/> <b>Major</b>	<input type="checkbox"/> Division of any parcel producing 6 or more lots	→ Preliminary Plat (see sec. 54-191) → Rezoning Application (see sec. 54-192) → Final Plat (see sec. 54-193)
<input type="checkbox"/> <b>Easement Survey</b>	<input type="checkbox"/> Survey showing an access and/or utility easement	→ Final Plat (see sec. 54-193) → Copy of the deed of easement (see sec. 54-71)

**2. Applicant**

Property Tax Map #(s): \_\_\_\_\_

Name(s) \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Contact number: \_\_\_\_\_

Email Address: \_\_\_\_\_

*Note: If the property owner(s) as shown by the tax commissioner's office is (are) not the applicant, the owner's (owners') signed and notarized authorization(s) must accompany this application.*

**3. Property Owner(s)** (who presently owns the property?)

Name(s): \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Contact number(s): \_\_\_\_\_

Email Address: \_\_\_\_\_

**4. Surveyor/ Engineer/Architect** (who completed the survey?)

Firm Name: \_\_\_\_\_

Name of Individual Preparing Plat: \_\_\_\_\_ certification #: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Contact number(s): \_\_\_\_\_

Email Address: \_\_\_\_\_

**5. Certification\***

\*If signatory is not owner of record, a completed "Owner/Agent Agreement" must be attached.

**The undersigned hereby certifies that all information submitted with this application is complete, true and correct. I understand any errors and/or omissions may lengthen the time to process the request.**

_____	_____	_____
<i>Print Name of Property Owner 1</i>	<i>Signature of Property Owner 1</i>	<i>Date</i>

_____	_____	_____
<i>Print Name of Property Owner 2</i>	<i>Signature of Property Owner 2</i>	<i>Date</i>

_____	_____	_____
<i>Print Name of Applicant</i>	<i>Signature of Applicant</i>	<i>Date</i>