

APPLICATION FOR PRELIMINARY PLAT APPROVAL

THE UNDERSIGNED HEREBY APPLIES TO THE BOARD OF COUNTY COMMISSIONERS OF SUWANNEE COUNTY, FLORIDA FOR PRELIMINARY APPROVAL OF A PROPOSED SUBDIVISION TO BE CALLED

I. LEGAL DESCRIPTION OF PROPERTY:

I. APPROXIMATE AREA OF SUBDIVISION:

II. TOTAL NUMBER OF LOTS OR PARCELS:

V. SIZE OF LOTS:

V. DIRECTIONS TO PROPERTY:

**VI. OWNER (S)
NAME**

MAILING ADDRESS

TELEPHONE

**VII. SUBDIVIDER
NAME**

MAILING ADDRESS

TELEPHONE

**VIII ENGINEER
NAME**

MAILING ADDRESS

TELEPHONE

**IX. SURVEYOR
NAME**

MAILING ADDRESS

TELEPHONE

X. VARIANCES THAT WILL BE REQUESTED:

**THE OWNER OF THIS PROPERTY AND THE UNDERSIGNED AGREE TO
CONFORM TO ALL REQUIREMENTS OF THE SUWANNEE COUNTY
SUBDIVISION REGULATIONS AND TO ALL APPLICABLE LAWS.**

SIGNATURE OF APPLICANT _____

ADDRESS

DATE: