



Westmoreland County, Virginia

Land Use Administration

P. O. Box 1000
Montross, VA 22520
Phone 804-493-0120 FAX 804-493-0604

Building Official
Zoning Official
Planning Commission
Board of Zoning Appeals
Board of Building Appeals
Wetlands Board

PLAT APPLICATIONS

(September 2008)

Approval No: _____ Date Submitted: _____
Tax Map Identification: _____ # Lots _____ Zoning District: _____
Applicant/Owner: _____ Email: _____
Applicants' Address: _____ City: _____ State: _____ Zip: _____
Phone #: _____ Phone #: _____ Fee Amount \$ _____ Check # _____
Description of proposal: _____

SUBMIT THE APPROPRIATE ITEMS and NONREFUNDABLE FEE

- Was there construction on the site since the last plat was approved?..... YES NO UNKNOWN.....
If yes explain: _____
- ALL PLATS are required to submit a copy of the last deed and/or plat of record for the property(s)
- ALL PLATS are required to submit a copy of deed referenced on the plat for R/W or Access Easements
- Submit a copy of the plat for each Tax Map parcel within the plat boundary for Land Use to keep (3 minimum)
- Submit additional copies to be returned to the applicant after approval
- Submit five additional copies when Virginia Department of Transportation (VDOT) approval is required.....
- Traffic Impact Analysis submitted when required by VDOT regulations.....

CHECK REQUESTED APPROVAL and SUBMIT NONREFUNDABLE FEE

- Administrative review of a proposed plat.....Fee: \$75
 - Boundary Survey or Resurvey of an existing parcel.....Fee: \$75
 - Boundary Line Adjustment between TWO existing lots or parcels.....Fee: \$75
 - Combination Plat of TWO of existing lots or parcels deed of record.....Fee: \$75
 - Exempt Subdivision Plat.....Fee: \$400
 - Family Subdivision Plat:.....Fee: \$200
 - Lot line vacation plat between TWO lots or parcels.....Fee: \$75
 - Partition Plat Approval of not more than TWO existing parcels.....Fee: \$75
 - Other (Describe) _____ Minimum of \$ 75 Each _____ Fee: \$ _____
 - Road Name Fee: (\$290 for each new public or private road) # of roads _____) x \$290 = _____ Fee: \$ _____
- TOTAL FEE:** _____
- Recording Bond to be refunded upon applicant providing a copy of the recorded Plat to Land Use..... Fee: \$200

COUNTY REVIEW REQUESTED: First business day is the next business day after the date of submittal

- Standard 10 to 60 days unless otherwise requested = TOTAL FEE: _____
- 0 TO 3 BUSINESS DAYS BASE FEE of \$ _____ TIMES 4 = TOTAL FEE: _____
- 4 TO 5 BUSINESS DAYS BASE FEE of \$ _____ TIMES 3 = TOTAL FEE: _____
- 5 TO 10 BUSINESS DAYS BASE FEE of \$ _____ TIMES 2 = TOTAL FEE: _____

- Preliminary Plat approval. (\$600 plus \$15 per lot)..... Fee: _____
- Final Plat Fee: (\$600 plus \$15 per lot)..... Fee: _____
- REPLATTING: (\$600 plus \$15 per lot)..... Fee: _____
- Other: (Describe) _____ Fee: _____
- Road Name Fee: (\$290 for each new public or private road) # of roads _____) x \$290 = _____ Fee: _____
- VDOT Street Design proposed for this project:
- Traditional Street Design _____ Neotraditional Street Design (requires Planning Commission approval)
- Other (Describe) _____
- Vacation Plat for ... Access Easement..... Utility Easement.... Right-of-Way
- Five (5) additional copies for... Street/Road... Lots... Alley ...(\$600 plus \$15 per lot).... Fee: _____
- Final Plat for the Subdivision known as: _____

I hereby grant permission for staff, Commission, or Board members upon the property and understand that, without the above described information and/or materials, the fee is non-refundable if the plat is denied.

Applicant/Owner Signature: _____ Date: _____

OFFICE USE

Description of proposal: _____

___ Subdivision Code Variance is required for: NO YES _____

___ Date Assigned for Planning Commission review: N/A _____

___ Traffic Impact Analysis submitted when required by VDOT regulations: VDOT DETERMINATION _____

___ VDOT Other: _____

___ Bond Requirements: NO YES _____

Plat Accepted – Denied for Review By: _____ Date: _____

Date/No.	Summarize comments — discussions – communications	Hours	Code / By
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___ **Plat Approved Date:** _____ **Plat Denied on:** _____ **By:** _____