Town of Hobgood - Subdivision Application Form

Subdivision Name_____Section/Phase:_____
Road Name/SR #_____
Township _____Tax Map #_____

Type of Plat	# of Lots	Fee Required	Total
❑ Minor Sub. Review *	_____	$ 40	$_____
❑ Sketch Plan Review	_____	$ 10	$_____
❑ Preliminary-Major **	_____	$ 60 + $ 8/lot	$_____
❑ Final Plat- Major	_____	$ 30	$_____

*Minor - 4 lots or less on existing road **Major - 5 or more lots, or 2 or more lots with new road or access easement

Surveyor/Engineer Name: _____
Contact Person_____ - Serve as representative of owner? ____Yes ___ No
Daytime Phone _____Fax_____

Developer/Owner's Name:_____
Daytime Phone_____Fax_____

Name and Address to whom all correspondence to be sent: _____
_____

Proposed Improvements:

(A) Streets **Length**
- ❑ None Proposed N/A
- ❑ Easement _____
- ❑ Public road _____
- ❑ Private road _____
- ❑ Proposed road/easement names _____
  _____

(B) Water
- ❑ Individual wells N/A
- ❑ Private water system Name of Company:_____

(C) Sewer
- ❑ Septic Systems
  - ❑ Soil map (for sketches only)
  - ❑ Soil evaluations by Halifax County Health Department
  - ❑ Soils report by private soil scientist
- ❑ Private sewer system Name of Company: _____

To the best of my knowledge and ability, I certify that the above information and that contained on the attached plat is true and accurate and complies with all applicable laws and ordinances.

By Owner/Developer_____Date_____

For Official Use Only

Distribute To:		**Comments Received**
NC Dept. of Transportation	Date_____	Date_____
Halifax Co. Environmental Health	Date_____	Date_____
Soil and Water Conservation	Date_____	Date_____
Halifax Co. Review Officer	Date_____	Date_____
Halifax Co. School Board	Date_____	Date_____
Recorded/Pickup Up	Date_____	Date_____
Sed. and Erosion Control Plan	Yes_____ No_____	N/A_____
Wetland Determination	Yes_____ No_____	N/A_____