



**City of Walterboro**  
**APPLICATION for**  
**PRELIMINARY PLAT REVIEW**  
**FINAL PLAT APPROVAL**

**\$50.00 min./\$10.00 per lot**

**\$20.00 min./\$10.00 per lot**

Date Received (OFFICE USE ONLY) \_\_\_\_\_

By (OFFICE USE ONLY) \_\_\_\_\_

Total Fee: (OFFICE USE ONLY) \_\_\_\_\_

Applicant (PLEASE PRINT): \_\_\_\_\_

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

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

Applicant Telephone Number: \_\_\_\_\_

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

**Parcel Address:**

Parcel Tax Map Number: \_\_\_\_\_

Parcel Zoning: \_\_\_\_\_

Existing Number of Parcels: \_\_\_\_\_

Proposed Number of Parcels: \_\_\_\_\_

Restrictive Covenants: \_\_\_\_\_

For **each** parcel after subdivision list parcel square footage, building gross square footage (if applicable) and number of dwelling units (if applicable):

**By signing below, I understand that, while this application will be carefully reviewed and considered, I am required to comply with all provisions of the Subdivision Ordinance. I further understand that I am required to provide water and/or sewer service to any new lots created as a result of this subdivision.**

Signature \_\_\_\_\_

Date \_\_\_\_\_

**TO BE FILLED OUT BY OFFICE STAFF**

Application Date: \_\_\_\_\_ Application Number: \_\_\_\_\_

Date of Zoning Review: \_\_\_\_\_

Staff: \_\_\_\_\_

Approved: ☐ Yes ☐ No

If no - reason: \_\_\_\_\_

Date Sent to Engineering: \_\_\_\_\_

Engineering

Water Available ☐ Yes ☐ No Initials: \_\_\_\_\_

Notes: \_\_\_\_\_

Sewer Available: ☐ Yes ☐ No Initials: \_\_\_\_\_

Notes: \_\_\_\_\_

Flood Plain ☐ Yes ☐ No Initials: \_\_\_\_\_

Notes: \_\_\_\_\_

Address Assigned: ☐ Yes ☐ No Initials: \_\_\_\_\_

Notes: \_\_\_\_\_

Date Returned to Zoning: \_\_\_\_\_