



# City of Aberdeen Department of Public Works

## Project Development Application Cover Sheet

### SITE DESCRIPTION

Project/Subdivision Name: \_\_\_\_\_ Plan Alias: \_\_\_\_\_

\_\_\_\_\_  
(Tax Map No.)      (Grid No.)      (Parcel No.)      (Lot No.)      (Plat #)      (Zoning)      (Tax ID)

\_\_\_\_\_  
(Street Address and/or Road Name)      (Residential)      (Conventional/Special Development)

\_\_\_\_\_  
(BOA #)      (No. of Lots)      (No. of Units)      (No. of Acres)      Water Zone      Sewer Zone

### APPLICANT/CONSULTANT INFORMATION

#### OWNER

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

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City, State, Zip Code)

\_\_\_\_\_  
(Telephone)      (Fax)      (E-mail)

\_\_\_\_\_  
(Contact Person)

#### DEVELOPER/CONTRACT PURCHASER

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

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City, State, Zip Code)

\_\_\_\_\_  
(Telephone)      (Fax)      (E-mail)

\_\_\_\_\_  
(Contact Person)

#### SURVEYOR/ENGINEER

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

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City, State, Zip Code)

\_\_\_\_\_  
(Telephone)      (Fax)      (E-mail)

\_\_\_\_\_  
(Contact Person)

### INCLUDED INFORMATION:

\_\_\_ ROAD & DRAINAGE PLANS      \_\_\_ SEWER & WATER PLANS      \_\_\_ ESC PLANS      \_\_\_ SMWM PLANS  
\_\_\_ OTHERS

THE CITY PLANNING COMMISSION MEETS ON THE SECOND AND FOURTH MONDAY OF EACH MONTH. TWELVE (12) FOLDED COPIES NEED TO BE SUBMITTED FOUR (4) WEEKS PRIOR TO THE MEETING ALONG WITH A LIST OF ADJACENT OWNERS, ALL APPROPRIATE FEES AND SUBMITTAL REQUIREMENTS.