

## CUMBERLAND COUNTY JOINT PLANNING BOARD SUBDIVISION, GROUP DEVELOPMENT AND SITE PLAN SUBMISSION FORM

TYPE REVIEW	DATE	BILL AMT	RECEIPT
PRELIMINARY			
FINAL			
EXTENSION/ADDITION			
REVISION			
PARKS & OPEN SPACE FEE			
COPIES			

Case Number: \_\_\_\_\_  
 Date Received: \_\_\_\_\_  
 Received By: \_\_\_\_\_  
 Planning/Town Board  
 Meeting Date: \_\_\_\_\_

**NOTE: See Fee Schedule \$**

**12 Working Days Required for all reviews**

**Submit 3 Copies of a Site Plan Required for ALL Developments**

Name of Development: \_\_\_\_\_

Location: \_\_\_\_\_

Parcel Identification Number(s): \_\_\_\_\_

Number of Lots/ Use of Property  
 Units to be Approved: \_\_\_\_\_ (Be Specific): \_\_\_\_\_

Submission Type: (Subdivision/Group Development/Commercial): \_\_\_\_\_

Type of Water Facility (existing or proposed): Well \_\_\_\_\_ PWC \_\_\_\_\_ Comm.(Specify) \_\_\_\_\_

Type of Sewer Facility (existing or proposed): Septic \_\_\_\_\_ PWC \_\_\_\_\_ Other (Specify) \_\_\_\_\_

Owner/Developer: _____
Mailing Address: _____
_____
Telephone Number(s): _____
FAX Number: _____
EMAIL: _____
Check if this is the person who is paying. * _____

Engineer/Surveyor: _____
Mailing Address: _____
_____
Telephone Number(s): _____
FAX Number: _____
EMAIL: _____
Check if this is the person who is paying. * _____

\* If person paying is different than above give name and mailing address of person paying.

Name: \_\_\_\_\_ Mailing Address: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Telephone No.: \_\_\_\_\_ Call when ready Yes \_\_\_\_\_ No \_\_\_\_\_

Do you wish the County to install street signs at a fee if required? YES \_\_\_\_\_ NO \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**"FOR ANY QUESTIONS, CALL: ED BYRNE 678-7609 or JEFF BARNHILL 678-7765 "**

**NOTE: THE APPLICANT IS RESPONSIBLE FOR ENSURING EASEMENTS WHICH MAY EXIST ON THE SUBJECT PROPERTY ARE "ACCOUNTED FOR AND SHOWN ON THE PLAN, NOT ENCUMBERED AND THAT NO PART OF THIS DEVELOPMENT IS VIOLATING THE" RIGHTS OF THE EASEMENT HOLDER.**

**OFFICIAL USE ONLY**

Industrial Park	<input type="checkbox"/> Yes <input type="checkbox"/> No	Airport Area	<input type="checkbox"/> Yes <input type="checkbox"/> No
Watershed	<input type="checkbox"/> Yes <input type="checkbox"/> No	Utilities Other:	<input type="checkbox"/> Yes <input type="checkbox"/> No Utility Name _____
Sewer Service Area	<input type="checkbox"/> Yes <input type="checkbox"/> No	Voluntary Agricultural District	<input type="checkbox"/> Yes <input type="checkbox"/> No
Averasboro Battlefield	<input type="checkbox"/> Yes <input type="checkbox"/> No	Town Limits:	_____
Eastover Sanitary District	<input type="checkbox"/> Yes <input type="checkbox"/> No	Municipal Influence Area:	_____
NORCRESS	<input type="checkbox"/> Yes <input type="checkbox"/> No	Zoning:	_____ Initial Zoning Area: _____
Military 5/mi	<input type="checkbox"/> Yes <input type="checkbox"/> No	Verified by:	_____ Date: _____

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**Fee Schedule**

(Cumberland County, Eastover, Falcon, Godwin, Linden, Spring Lake, Stedman and Wade)

<b><u>SUBDIVISION FEES:</u></b>	<b><u>&lt;OR = 5 LOTS</u></b>	<b><u>&gt;5 LOTS</u></b>
PRELIMINARY SUBDIVISIONS	\$100	\$200
SUBDIVISION REVISION AND EXTENSIONS	\$25	\$50
<b><u>GROUP DEVELOPMENTS FEE:</u></b>	<b><u>&lt;OR = 5 LOTS</u></b>	<b><u>&gt;5 LOTS</u></b>
PRELIMINARY GROUP DEVELOPMENT	\$25	\$50
GROUP DEVELOPMENT REVISION AND EXTENSION	\$25	\$50
<b><u>SITE PLANS AND FINAL PLAT FEES:</u></b>		
COMMERCIAL AND INDUSTRIAL SITE PLANS		\$50
SITE PLAN REVISIONS AND EXTENSIONS		\$25
FINAL PLATS		\$25
<b><u>WAIVER/VARIANCES/ALTERNATE YARD FEES:</u></b>		
SUBDIVISION/GROUP DEVELOPMENT/SITE PLAN/MIA STANDARDS		\$200

(Note: This does not include any fees that Towns may have in addition to the Planning & Inspection Department)