



Community Development Division of Planning & Zoning

AMHERST COUNTY ADMINISTRATION BUILDING
153 WASHINGTON STREET
P. O. Box 390
AMHERST, VIRGINIA 24521
TELEPHONE (434) 946-9303

www.countyofamherst.com

Application for Subdivision/Family Division/Reconfiguration

Section A: Applicant Information *(Please print in blue or black ink)*

Last (Name of Applicant)			First	MI
Mailing Address				
Telephone Number(s)			Home	Business
Property Owner(s) Name				
Property Address				
Name of Subdivision			Name of Developer	
Person Preparing Plat	Name of Company / Firm		E-Mail Address	
Location of Property (Landmarks, Intersections, or Other)				
Tax Parcel ID No.:				
Deed Book:		Page No.:		
Instrument No.:				

Section B: Plat Information

Type of Plat: Preliminary_____ Final:_____

Type of Subdivision (Check all that apply):

Reconfiguration_____ Family Division_____ Subdivision_____

How will lots within the subdivision be provided water and sewer? (Check all that apply)

Public Water_____ Private Wells_____

Public Sewer_____ On-site Septic System_____ Mass Drainfield(s)_____



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Zoning:_____ Comprehensive Plan Land Use Designation:_____

Magisterial District:_____

How many lots comprise the subject property?_____ Total area:_____ acres

How many new lots are proposed with the subdivision?_____ Total area:_____ acres

Total area of remaining (residue parcels)?_____ acres

Total area of open space / common areas:_____ acres

Will a property owner's association be created for the maintenance of open-space areas or common space?_____

Will a road maintenance agreement be required for the subdivision? Yes_____ No_____

If yes, please list the lots associated with the road maintenance agreement:_____

Is the subdivision located within the Watershed District? Yes_____ No_____

Is the subdivision located within a Dam Inundation Zone? Yes_____ No_____

Section C: Other Department / Agency Review

Please check the appropriate spaces below to indicate whether the subdivision will result in improvements or approvals that require official review by one or more other departments or agencies. Your answers below will help Amherst County determine which other departments or agencies might have to officially review and/or approve your subdivision plat. If you believe that official review and/or approval by one or more of the below departments or agencies is unnecessary, please check "N/A".

Virginia Department of Transportation (VDOT)	Yes_____	N/A_____
Amherst County Health Department (VDH)	Yes_____	N/A_____
Amherst County Public Service Authority (ACSA)	Yes_____	N/A_____
Amherst County Erosion and Sediment Control	Yes_____	N/A_____



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Please complete and submit the attached subdivision checklist along with a digital copy of the preliminary plat. All items listed on the checklist must appear on the preliminary plat. Amherst County reserves the right to request up to five (5) hard copies of the preliminary plat.

Please submit no more than six (6) copies of the final plat for signatures. All plats must be prepared by a professional engineer or land surveyor licensed in the Commonwealth of Virginia.

Section D: Signature

I do hereby certify that I have read and am familiar with the requirements for the submission of plats as provided for under the Subdivision Ordinance of the Code of Amherst County and the Code of Virginia as amended, and further that this submittal is in compliance with those requirements.

Property Owner Signature	Date	Property Owner Signature	Date
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Property Owner Signature	Date	Property Owner Signature	Date
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Agent Signature	Date	Agent Signature	Date
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***** DO NOT WRITE BELOW THIS LINE – OFFICE USE ONLY*****

DO NOT WRITE IN THIS SPACE – OFFICE USE ONLY

Date Submitted: _____ Accepted By: _____ (Initial)

Subdivision Review Required: Planning Commission _____ Administrative _____

Planning Commission Action: Approved _____ Denied _____ Date: _____

Modification / Conditions: _____

Date of Developmental Review Committee Meeting (If applicable): _____

Revised? Yes _____ No _____

Comments _____

Are the lots in compliance with the zoning district requirements for minimum lot width and area?

Yes _____ No _____

Is any portion of the proposed subdivision located within 1,000 linear feet of a public water/sewer line?

Yes _____ No _____ Comments _____

Total Fee: _____ Date Paid: _____

Plat Approved / Denied by Subdivision Agent or Planning Commission:

Signature

Date