



TOWN OF MILLVILLE
 36404 Club House Road, Millville, DE 19967
 TEL (302) 539-0449 FAX (302) 539-0879
www.millville.delaware.gov

DATE RECEIVED: _____
 APPLICATION REVIEW FEE: _____
 ESCROW FEE: _____
 SUBDIVISION FEE: _____

SUBDIVISION SITE PLAN REVIEW APPLICATION

Check if this application is a REVISION to an approved plan.

MINOR OR MAJOR

Town Code Chapter 125 Subdivision of Land

PROPERTY OWNER(S) INFORMATION

Name(s): ASF MBTS, LLC - Rod Hart
 Address: 3565 Piedmont Road, NE, Building One, Suite 200, Atlanta, GA 30305
 Phone Number: 443-418-6658
 Email: rodhart68@gmail.com

APPLICANT(S) INFORMATION

Name(s): ASF MBTS, LLC - Rod Hart
 Address: 3565 Piedmont Road, NE, Building One, Suite 200, Atlanta, GA 30305
 Phone Number: 443-418-6658
 Email: rodhart68@gmail.com

PROPERTY INFORMATION

Location: Powell Farm Road (SCR 365) and Roxana Road (SR 17)
 Tax Map Parcel #: 134-15.00-91.01
 Current Zoning District: MPC
 Proposed Zoning District: MPC

ENGINEER/SURVEYOR INFORMATION

Name: Land Tech Land Planning, LLC - Attn: Jeff Clark
 Address: Taggart Professional Center, Suite 202, 32895 S. Coastal Highway, Bethany Beach, DE 19930
 Phone Number: 302-539-2366
 Email: jeffc@landtechllc.com

BRIEFLY DESCRIBE PROPOSED SUBDIVISION PROJECT

Millville by the Sea - West Village A-2, consisting of eighty-seven (87) Single Family lots.

SUBDIVISION SITE PLAN APPROVAL PROCESS CAN BE FOUND IN THE TOWN CODE AT CHAPTER 125 ENTITLED SUBDIVISION OF LAND

Subdivision Fee - \$450.00 per Lot/Unit/Site 87 Lots/Units/Sites x \$450.00 = \$ 39,150
 20% Due with application. Check# _____ Date: _____ \$ 7,830
 80% Due at final approval. Check# _____ Date: _____ \$31,320

I/We hereby apply to the Town of Millville for a Subdivision Site Plan Approval on the property described above and certify that all the information and attached documentation provided by me/us in the application is correct.

[Signature] 7/10/2023
 Property Owner Signature Date
[Signature] 7/10/2023
 Applicant Signature Date

TOWN USE ONLY

APPROVAL DATE: _____ DENIED DATE: _____
 ADMINISTRATIVE OFFICIAL: _____