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

DATE RECIEVED: _____
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): _____
Address: _____
Phone Number: _____
Email: _____

APPLICANT(S) INFORMATION
Name(s): _____
Address: _____
Phone Number: _____
Email: _____

PROPERTY INFORMATION
Location: _____
Tax Map Parcel #: _____
Current Zoning District: _____
Proposed Zoning District: _____

ENGINEER/SURVEYOR INFORMATION
Name: _____
Address: _____
Phone Number: _____
Email: _____

BRIEFLY DESCRIBE PROPOSED SUBDIVISION PROJECT
_____
_____
_____

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 _____ Lots/Units/Sites x $450.00 = $ _____
20% Due with application. Check# _____ Date: _____
80% Due at final approval. Check# _____ Date: _____

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.

_____
Property Owner Signature **Date**

_____
Applicant Signature **Date**

TOWN USE ONLY

APPROVAL DATE: _____ **DENIED DATE:** _____

ADMINISTRATIVE OFFICIAL: _____