



SITE PLAN APPLICATION

For Office Use Only
File: _____
Date: _____

1. **PROJECT NAME:** _____

2. **LOCATION OF PROPERTY:**

Address _____

Tax ID Number _____

Cross Streets _____

3. **IDENTIFICATION:**

Applicant _____

Address _____

City/State/Zip _____

Phone _____ **Fax** _____

Email _____

Property Owner _____

Address _____

City/State/Zip _____

Phone _____ **Fax** _____

Email _____

Preparer of Site Plan _____

Address _____

City/State/Zip _____

Phone _____ **Fax** _____

Email _____

4. PROPERTY INFORMATION:

Zoning District _____ Area _____ Width _____
Current Use _____

Proposed Use:

- | | | |
|--------------------------|----------------------|-------------------------------|
| <input type="checkbox"/> | Residential | Number of Units _____ |
| <input type="checkbox"/> | Commercial | Gross Floor Area _____ |
| <input type="checkbox"/> | Office | Gross Floor Area _____ |
| <input type="checkbox"/> | Research/Lab | Gross Floor Area _____ |
| <input type="checkbox"/> | Industrial | Gross Floor Area _____ |
| <input type="checkbox"/> | Institutional | Gross Floor Area _____ |
| <input type="checkbox"/> | Recreation | Gross Floor Area _____ |
| <input type="checkbox"/> | Other | _____ |

I, _____ (applicant), do hereby swear that the above statements are true and accurate to the best of my knowledge.

Signature of Applicant

Date

I, _____ (property owner), hereby give permission for Williamston City officials, staff, and consultants to go on the property for which the above referenced site plan is proposed for purposes of verifying information provided on the submitted application.

Signature of Property Owner

Date