

SINCE 1889



TOWN OF OCEAN VIEW, DELAWARE
PLANNING AND ZONING COMMISSION
SUBDIVISION/COMBINATION OF LAND

Land Use • Permitting • Licensing • Code Enforcement • Public Works

302 539-1208 (office) • 302 537-5306 (fax)

admintov@oceanviewde.com / www.oceanviewde.com

SINCE 1889



Fee: \$ _____

P- _____

I (We) hereby apply for approval of a land development site plan and certify that all information and documents provided for this application are correct.

Applicant(s) (*Print*): _____ Date: _____

Address: _____

Signature(s): _____ Date: _____
Applicant(s)

Owner(s) of Record (*Print*): _____ Phone #: (____) _____

Address: _____

Signature(s): _____ Date: _____
(Property Owner(s))

All required documentation shall be submitted to the Administrative Official by the 15th day of the month prior to the month in which the plan will be considered by the Planning & Zoning Commission.

TOWN USE ONLY: *Administrative Official Signature:* _____

Location: _____

PIDN: _____ . _____ CTM#: _____ Zoned: _____

Total Area: _____ SF/Acres Total Present Street Frontage: _____ LF

Number of Proposed Lots: _____ Number of Proposed Units: _____

TOWN USE ONLY:

PLANNING AND ZONING COMMISSION REVIEWS

CONCEPT PLAN: Received: _____ Advertised: _____ Reviewed: _____

TAC (*if applicable*): Reviewed: _____ Attending: _____

PRELIMINARY SITE PLAN: Received: _____ Advertised: _____ Reviewed: _____

APPROVED: _____ DENIED: _____ DATE: _____
Chairperson, Planning & Zoning Commission

FINAL SITE PLAN: Received: _____ Advertised: _____ Reviewed: _____

APPROVED: _____ DENIED: _____ DATE: _____
Chairperson, Planning & Zoning Commission