



Town of Nolensville

Application for Sketch Plat Approval

Application Date	Commission Agenda Date
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Location	Subdivision Name		Location of Property	
	Map and Parcel Number	Total Acreage	Total Lots	Zoning
Owner/Applicant	Owner		Owner Address	
	Applicant <i>(if different from Owner)</i>		Applicant's	
	Applicant's Phone	Applicant's Cell Phone	Applicant's Fax	Applicant's Email
	Surveyor	Surveyor's Phone	Mail Correspondence to	
	Requested Variances <i>(if any)</i>			
Applicant's Signature		Date		
Copies	<i>(check if completed or provided)</i>			
<input type="checkbox"/> Four (4) copies of proposed sketch plan scaled at no smaller than 1" = 200', and an electronic copy in PDF format.				
<input type="checkbox"/> Fifteen (15) copies of proposed sketch plan on 11" x 17" or 24" x 36" sheets and an electronic copy in PDF format.				
Existing Conditions	Existing Conditions			
<input type="checkbox"/> Location sketch map, north point, date and owner's name and address provided on plat.				
<input type="checkbox"/> Zoning district, map and parcel number, and total acreage of original tract being subdivided shown on plat.				
<input type="checkbox"/> Names of adjoining property owners or subdivisions identified on plat. Add adjoining property zoning classification.				
<input type="checkbox"/> Provide an excerpted copy of the zoning map identifying the property being developed.				
<input type="checkbox"/> Site contour map interval at no more than 5' unless approved by the Planning Commission.				
<input type="checkbox"/> Notation of any existing legal rights-of-way or easements, or encumbrances affecting the properties.				
<input type="checkbox"/> Approximate 100-year flood line for portion of property so encumbered shown on plat, if applicable. Indicate FEMA panel reference if not applicable.				
<input type="checkbox"/> Show all the adjoining existing roadways, pedestrian ways and proposed connection locations.				
Prop. Improvements	Proposed Improvements			
<input type="checkbox"/> General roadway and lot patterns.				
<input type="checkbox"/> Proposed Phasing if any.				
<input type="checkbox"/> Vicinity map of the property.				
<input type="checkbox"/> Date and approximate north arrow.				
<input type="checkbox"/> Name, address and phone number of the property owner(s).				
<input type="checkbox"/> Name, address and phone number of the developer.				

Application for Sketch Plat Approval *(Continued)*

Impr (Continued)	<input type="checkbox"/> Name of the sketch plat designer. <input type="checkbox"/> Proposed Zoning Classification. <input type="checkbox"/> Fire hydrants (if required) located properly. <input type="checkbox"/> Show all natural and historic areas such as mature tree areas, cemeteries, historic sites, stone fences, creeks, ridges and hilltops, sinkholes and areas with slopes in excess of 15%.
Doc.	<p>Administrative Documentation</p> <input type="checkbox"/> Application fee paid, if any.
Status	<input type="checkbox"/> Application has been deemed complete as of: _____ <input type="checkbox"/> Application received Planning Commission approval on: _____ subject to the following modifications: <input type="checkbox"/> Application was disapproved by Planning Commission on: _____ for the following reasons: