



City of New Castle
220 Delaware Street
New Castle, Delaware 19720



APPLICANT: _____

OWNER: _____

TELEPHONE: _____

TAX PARCEL #: _____

APPLICANT IS:

- REAL OWNER
- AGENT OF OWNER
- DEVELOPER
- EQUITABLE OWNER

EXISTING ZONING IS:

PROPOSED ZONING IS:

NAME OF SUBDIVISION (IF APPROPRIATE):

TYPE OF SUBDIVISION:

- MAJOR
- MINOR

SUBDIVISION ACREAGE

Lots
Streets
Parkland
Other
Total Gross

LAND DEVELOPMENT ACREAGE

Building Cover _____
Streets
Parking/Loading _____

UTILITY EASEMENT OR RT OF WAY

Linear Ft/Miles _____ Width
Type of Utility _____

Acreeage of Adjoining Land in Same Ownership (if any)

Purpose of Plan: _____

Signature of Owner or Applicant

Date

For City Use Only:

Pre-application checklist:

- Location Map
- Additional description (if needed)
- _____ Sent to Planning Commission
- _____ Reply to Applicant

Conditional Approval Checklist:

- Preliminary Plat
- Construction plans
- _____ Received by Building Official
- _____ Scheduled date for Planning Commission
- _____ Conditional approval by Planning

Final Approval Checklist:

- Final Plat
- _____ Extension issued by Building Official Performance Bond:
- Company: _____
- Amount: _____

Historic Area Commission Approval

- Approved Date _____
- Not Approved

Major Subdivision:

Passed by City Council

Ordinance Number

Minor Subdivision:

Approved by City Council

Resolution Number

Final Plats filed with County

Fees:

	Filing	Review	Appeal
Amount	_____	_____	_____
Date Paid	_____	_____	_____
Check Number	_____	_____	_____