



**RUTHERFORD COUNTY REGIONAL PLANNING COMMISSION**  
 One South Public Square, Room 200, Murfreesboro, Tennessee, 37130  
 OFFICE: 615.898.7730 FAX: 615.898.7823

**SUBDIVISION PLAT APPLICATION**

Name of Subdivision	Section Number (if applicable)	Date of application
---------------------	--------------------------------	---------------------

Type:  Preliminary  Final (Major)  Final (Minor – Includes Resubs)  Partition  Construction Plans

Applicant/ Developer

Mailing Address	City	State	Zip
-----------------	------	-------	-----

Phone Number	Fax Number	Email
--------------	------------	-------

Project Engineer/Surveyor

Mailing Address	City	State	Zip
-----------------	------	-------	-----

Phone Number	Fax Number	Email
--------------	------------	-------

NOTE: The applicant is responsible for notifying the Planning Department of any changes to contact information.

**PLEASE COMPLETE THE FOLLOWING PROPERTY INFORMATION:**

1.	Tax Map	Group	Parcel	Deed Book	Page Number
	Civil District		County Commissioner		Number of Proposed Lots
	Was a concept meeting held with staff? <input type="checkbox"/> YES <input type="checkbox"/> NO If yes, on what date did this meeting occur:				

**ADDITIONAL REQUIRED INFORMATION:**

2.	<input type="checkbox"/> A copy of the owner's deed
<i>Note: NPDES is required by the state if more than 1 acre of land is to be disturbed.</i>	

NOTES: The Development Tax is \$1,500 per lot; 50% is paid prior to recording the plat and 50% is paid prior to obtaining a building permit for each lot. The applicant is responsible for submitting final plats to the Rutherford County Register of Deeds Office for recording. Please contact the Register of Deed Office at 615.898.7870 for recording fees. Recorded plats become a part of the permanent files of the Planning and Engineering Department.

A Land Disturbance Permit and associated fees will be required to be paid before commencing any grading activities.

**I hereby certify that the information contained in this application is true and correct to the best of my knowledge and belief.**

Applicant's Signature:	Applicant's Name (Printed):	Date:
------------------------	-----------------------------	-------

**STAFF USE ONLY**

	Submittal Type	Fees	Total
1.	Preliminary Plan/Final Plat (Major)	\$500 base fee/\$100 per Lot	
	Final Plat (Minor)/Partition	\$100 base fee/\$50 per Lot	

Received by:	Date:	Receipt Number:
--------------	-------	-----------------