



P.O. Box 209 | 6 East Pennsylvania Avenue
 Lovettsville, VA 20180
 (540) 822-5788

Final Subdivision Plat Application

Date Application Received _____

Fee: \$500 plus \$25 per lot

Parcel Information:

Title of Subdivision: _____

Physical Location: _____

PIN (Parcel Identification Number) _____ Zoning Classification: _____

Total Acreage: _____ Average lot size: _____ Number of lots Proposed: _____

Proposed Use: _____

Property Owner's Name: _____

Address (Mailing) _____ E-Mail: _____

Town/City: _____ State: _____ Zip: _____

Telephone: Work _____ Mobile _____ Fax _____

Owner's Representative (If Applicable): _____

Address (Mailing) _____ E-Mail: _____

Town/City: _____ State: _____ Zip: _____

Telephone: Work _____ Mobile _____ Fax _____

Surveyor / Engineer: _____

Address (Mailing) _____ E-Mail: _____

Town/City: _____ State: _____ Zip: _____

Telephone: Work _____ Mobile _____ Fax _____

I hereby certify that I am the property owner and this application in all its parts, is complete, correct and in compliance with the applicable Town of Lovettsville Ordinances, to the best of my knowledge. I acknowledge responsibility for all engineering, legal, zoning and planning review fees incurred by the Town in connection with the review of this application, and all outstanding debts owed to the Town of Lovettsville and Loudoun County have been paid prior to filing this application.

Signature of Property Owner(s)	Printed Name of Property Owner(s)	Date
(Attach sheet for additional Property Owners with their printed name(s) and date.)		

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-----Office Use Only-----

Application Complete

Application Fee Paid

Real Estate Taxes Paid

Loudoun County Personal Property Taxes Paid

All Fees/Real Estate Tax Owed to Town Have Been Paid (Including Auto Decal)