Florence County/Municipal Final Plat Checklist

Background Information

Name of Proposed Subdivision________________________________________________________

Name of Contact/Company___________________________________________________________

Current Tax Map, Block & Parcel #______________________ Zoned:__________________

Total Number of Proposed Lots________________________________________________________

To be Submitted:

_____ Number of Copies of Record Drawings (Minimum of 6)

_____ Number of Final Plats (Minimum of 5)

_____ Data submission with As-Built

_____ Close-Out Package with all applicable signatures

Contents of Plat Y – Yes N – No N/A – Not Applicable

_____ scale 1: 100 or less

_____ Show the location map and north arrow

_____ All easements and right of ways shown on final plat as described in the As-builts

_____ Show zoning restrictions.

_____ Show setbacks according to preliminary plan.

_____ Show Parcel #’s and E-911 Addresses on Final plat.