



## FLOYD COUNTY PLAT REVIEW SUBMISSION FORM

Please complete and submit this form, along with plats to:

Floyd County Administrative Offices  
 P. O. Box 218 ~120 W. Oxford Street, Floyd, VA 24091  
 Phone: (540) 745-9300

TAX PARCEL #'s:				
TYPE OF PLAT	Number of Lots	Agent Review	PC Review*	
<input type="checkbox"/> Agricultural Subdivision		1-3 lots	4+ lots	
<input type="checkbox"/> Family Subdivision		1-3 lots	4+ lots	
<input type="checkbox"/> <i>A completed Affidavit of Family Subdivision must be submitted with the plats for consideration</i>				
<input type="checkbox"/> Lot Subdivision (1-3 lots)		✓	✗	
<input type="checkbox"/> Standard Subdivision (4+ lots)		✗	✓	
<input type="checkbox"/> Townhouse/Condominium Subdivision		✗	✓	
<input type="checkbox"/> Parcel(s) of Record		✓	✗	
<input type="checkbox"/> Lot Line Revision(s)		✓	✗	
<input type="checkbox"/> Cemetery Subdivision		✓	✗	
<input type="checkbox"/> Vacation of Plat		✓	✗	
<input type="checkbox"/> Other _____		Ask Agent		
Number of copies of the plat required for submittal:		Minimum of 3	10	
*The Planning Commission (PC) meets on the 3 <sup>rd</sup> Tuesday of each month. Plats that need to be reviewed by them must be submitted to our office no later than 4:00 p.m. on the 2 <sup>nd</sup> Tuesday of the month in order to be placed on the agenda.				
CONTACT INFORMATION				
(Owner's information must be provided – phone number of email address)				
	APPLICANT/OWNER AGENT	OWNER	OWNER	
Name:				
Phone Number:				
Email Address:				
Who to contact:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
OFFICE USE ONLY		Date received:	# of copies received:	
<input type="checkbox"/> VDOT Review?	<input type="checkbox"/> E911 Review?	<input type="checkbox"/> Health Department Review? Date taken to HD by applicant: _____	Keep # _____ Copies	Fee \$ _____
<u>Who was contacted</u>		<u>Date Contacted</u>	<u>Date Picked Up</u>	
<b>NOTES:</b>				

**ALL HIGHLIGHTED SECTIONS ARE REQUIRED TO BE FILLED IN BY SUBMITTER**