

**CITY OF CRANSTON
SUBDIVISION & LAND DEVELOPMENT
APPLICATION FORM**

CHECK ALL THAT APPLY TO THIS APPLICATION

- | | |
|--|--|
| <input type="checkbox"/> Subdivision | <input type="checkbox"/> Master Plan |
| <input type="checkbox"/> Land Development | <input type="checkbox"/> Preliminary Plan |
| | <input type="checkbox"/> Final Plan |

PROJECT NAME _____

Assessor's Plat(s) _____

Assessor's Lot(s) _____

Location (street) _____

OWNER'S NAME(S) _____

Address _____

Telephone Number _____

ENGINEER _____

Address _____

Telephone Number _____

SURVEYOR _____

Address _____

Telephone Number _____

I (we) hereby certify that I (we) own the subject property and apply for Subdivision and/or Land Development Plan approval as drafted in the accompanying plans, and request that my (our) application be placed on the next available agenda of the City Planning Commission.

Signature of Owner(s) _____ **Title**

Date of Filing _____

Signature of Owner(s) _____ **Title**

Date of Filing _____