



**Pulaski County, Virginia
Planning & Zoning Office**

143 Third Street, NW, Suite 1
Pulaski, VA 24301
Phone: (540) 980-7710
Fax: (540) 980-7717

Subdivision Application

Applicant		Property Owner	
Name:		Name:	
Phone:		Phone:	
Mailing Address:		Mailing Address:	
E-mail:		E-mail:	
Project Information			
Project Name:		Subdivision Type:	
Zoning District:		Acreage:	
Magisterial District:		District Supervisor:	
Tax Map Number(s):			
Project Description:			
Property Location:			
Minimum Requirements for Submittal			
<input type="checkbox"/> 1. Full sized copies of the Subdivision Plan. <input type="checkbox"/> 2. Recorded deed and plat showing proof of property ownership, if available. <input type="checkbox"/> 3. Application fee as determined by the Unified Development Ordinance, Article 3.1, Table 3.1. Checks should be made payable to Pulaski County, VA.			
Disclaimer: Pulaski County assumes no legal or financial liability to the applicant or any third party whatsoever by approving the plans associated with this permit.			
I hereby acknowledge by my signature below that the foregoing application is complete and accurate and that I am the owner of the subject property. In addition, I hereby grant permission to the agents and employees of Pulaski County and the State of Virginia to enter the above property for the purposes of processing and reviewing the above application.			
Property Owner Signature:		Date:	
Applicant Signature:		Date:	