



**CLEMMONS
PLANNING
DEPARTMENT**

**Application For
Minor Subdivision**

P. O. Box 1710, Clemmons, NC 27012
3715 Clemmons Road

www.clemmons.org
Phone: 336-766-7511 Fax: 336-766-7536

1. Grantor _____ Grantee _____		<input type="checkbox"/> Clemmons		
2. Tax Map # _____	3. Zoning _____	4. Acreage _____	5. # of Lots _____	
7. Location of Development _____				
8. Contact Person				
Name and Mailing Address: _____				
(City) (State) (Zip Code)				
Phone: _____		Fax: _____		E-Mail: _____
9. Survey Prepared By				
Name and Mailing Address: _____				
(City) (State) (Zip Code)				
Phone: _____		Fax: _____		E-Mail: _____
DISCLAIMER: We do not administer, coordinate or enforce any private restrictive covenants that may have been recorded and are applicable to the property, and the developer is at their own risk if they do not check to see if any such restrictive covenants apply to the property and are later enforced by private legal action.		ADDITIONAL INFORMATION TO BE SUBMITTED WITH APPLICATION 1. FILING FEE – SEE FEE SCHEDULE. 2. PROPERTY DESCRIPTION DEED 3. SEALED SURVEY (2 copies)		
		Revised 7/06		

PLEASE MAKE AN APPOINTMENT FOR SUBMITTAL OF APPLICATION.

FOR OFFICE USE ONLY

400' Scale Map #	Payment Received:	Received:
	Amount: _____	Date: _____
Staff Person		Time: _____