

Town of Sunset Beach Planning and Zoning

Planning and Zoning
700 Sunset Boulevard North
Sunset Beach, NC 28468



Phone: 910-579-6297
www.sunsetbeachnc.gov

Major Subdivision Final Plat

Applications will be considered for Staff review only when deemed complete. The application will be regarded as incomplete until the following items are received by the Planning and Zoning Staff.

1. _____ **Signed Application**
2. _____ **Payment**
\$200 +10 per lot
1. _____ **Paper Plan Sets**
Four (4) 24 x 36, One (1) mylar **with all signatures**
1. _____ **Digital Submission**
For all documents submitted in paper copy, bring a digital copy with paper submission.
1. _____ **Supplemental Documentation**
HOA Articles of Incorporation
HOA Covenants and Restrictions
NCDOT Basic Letter (if applicable)
1. _____ **If improvements are not complete:** Performance Guarantee for Improvements
2. _____ **Plat Submission**
Specific requirements can be found in Section 13.02 of the Sunset Beach Unified Development Ordinance
All conditions of the preliminary plat approval must have been met before any final plat will be considered for review.

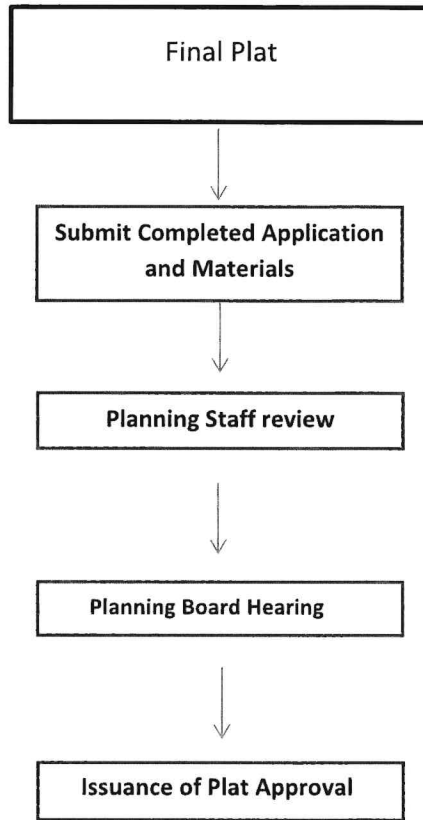
I certify that all information presented in this application is accurate to the best of my knowledge.

Signature of Applicant _____

Date _____

Printed Name _____

Staff Initials:	_____
Date:	_____



		Complete Application Due Date	Applicant Final Submission for PB	Planning Board Meeting
Planning Board	January	12/16/2022	1/20/2023	2/2/2023
	February	1/13/2023	2/17/2023	3/2/2023
	March	2/10/2023	3/24/2023	4/6/2023
	April	3/17/2023	4/21/2023	5/4/2023
	May	4/14/2023	5/19/2023	6/1/2023
	June	5/19/2023	6/23/2023	7/6/2023
	July	6/16/2023	7/21/2023	8/3/2023
	August	7/14/2023	8/25/2023	9/7/2023
	September	8/18/2023	9/22/2023	10/5/2023
	October	9/15/2023	10/20/2023	11/2/2023
	November	10/13/2023	11/21/2023	12/7/2023
	December	11/17/2023	12/21/2023	1/2024

Complete Application Date: All documents must be received by the close of business on the deadline date to be considered a complete application.

APPLICATION FOR FINAL PLAT SUBDIVISION

THIS SECTION FOR OFFICE USE

Application No.	SUBMAJ	Date	
Application Fee	\$	Invoice Number	
Master Plan Hearing Date		Preliminary Plat Hearing Date	

SECTION 1: APPLICANT INFORMATION

Applicant's Name:		Owner's Name:	
Applicant's Address:		Owner's Address:	
City, State, & Zip		City, State, & Zip	
Phone Number:		Phone Number:	
Email Address:		Email Address:	

Legal relationship of applicant to landowner:

SECTION 2: PROJECT INFORMATION

Parcel #:		Total property acreage:	
Zoning Classification:		Acreage to be disturbed:	
Water Provider:		Wastewater Provider:	
Number of Lots:		Phase:	

Additional Information:

SECTION 3: SIGNATURES

Applicant's Signature		Date:	
Applicant's Printed Name:		Date:	
Owner's Signature		Date:	
Owner's Printed Name:		Date:	

NOTICE TO APPLICANT

1. Applicant or agent authorized in writing must attend the planning board meeting.
2. All fees are non-refundable
3. A complete application packet must be submitted prior to the deadline in order to be placed on the next Planning Board Agenda

Office Use Only

<input type="checkbox"/>	Subdivision Fees: \$200 + \$10	Total Fee Calculation: \$
Attachments Included with Application: (Please include # of copies)		

CD /other digital version	<input type="checkbox"/> Y <input type="checkbox"/> N	Plan Sets	# of large	# of 11X17	Other documents/Reports	<input type="checkbox"/> Y <input type="checkbox"/> N
Payment Method:	Cash : <input type="checkbox"/> \$ _____		Credit Card: <input type="checkbox"/> Master Card <input type="checkbox"/> Visa		Check: <input type="checkbox"/> Check # _____	
Application received by:				Date:		
Application completeness approved by:				Date:		
Date scheduled for public hearing:						