

**CITY OF MCMINNVILLE
MINOR SUBDIVISION REVIEW FORM
(LESS THAN 5 LOTS, SITES, TRACTS, OR DIVISIONS)**

NAME OF SUBDIVISION: _____

SUBDIVISION OWNER: _____
ADDRESS: _____
PHONE NUMBERS: (WORK) _____ (HOME) _____

LICENSED SURVEYOR: _____
ADDRESS: _____
PHONE NUMBERS: (WORK) _____ (HOME) _____

SUBDIVISION DESCRIPTION
ADDRESS: _____
CIVIL DISTRICT _____ MAP # _____ GROUP # _____ PARCEL # _____
SUBDIVISION AREA (Acreage or square feet): _____
WITHIN CITY LIMITS _____ ZONING _____ UGB _____
WATER LINE SIZE _____ SEWER LINE SIZE _____ SUBSURFACE DISPOSAL _____

FOR OFFICE USE ONLY

APPROVED _____ DISAPPROVED _____ \$100 FEE PAID _____

REASON FOR DISAPPROVAL _____

DATE OF REVIEW _____

PLANNING & ZONING DIRECTOR