



APPLICATION FOR FAMILY SUBDIVISION COUNTY OF GOOCHLAND

Date: _____ Application No. _____

Name of Applicant: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Recipient Relation: _____ Recipient Name: _____

Copy of Deed: _____ Phone # _____

E-Mail _____

Tax Map # _____ Original Acres _____ Acres Transferred: _____

Acres Remaining: _____ Number of Cuts: _____ Remaining Cuts: _____

I acknowledge as the current property owner of the Tax Map No.(s) _____ that I am responsible for all taxes due on this property, I further recognize that taxes may extend into the following calendar year, depending on the date of subdivision recordation.

Name (Print)

Name (Print)

Signature

Signature

1. Submit application with a **minimum of 3 original subdivision plats** to be approved by Plats Officer. (An AutoCAD dwg file is requested but not required). Plats Officer will stamp one of the originals "Return this copy to Community Development".
2. Upon Plats Officer approval, applicant **will take the 3 original approved plats with the deed** to Goochland County Circuit Court Clerk's Office for recordation.
3. **Applicant will return a copy of the receipt of recordation to the Plats Officer** to verify the date of recordation and begin the 10-business day timeframe for processing of the plats.

Plats Officers Approval _____ Date: _____

Application Fee: \$75.00 Per Lot Amount Paid: _____ Date Paid: _____