APPLICATION FOR SUBDIVISION REVIEW

(Pursuant to Section 32.1-164 Code of VA)

Please fill out the information below (in *blue* ink) to aid us in locating this information so that we can review the plat as requested.

EACH LOT MUST HAVE: An existing approved sewage disposal system OR a valid sewage disposal permit OR approved soils work.

BEDFORD CO. SUBDIVISION AGENT	
BEDFORD CO. ACTIVITY # SD	(if reviewed through Planning)
DATE OF REQUEST:	
CONTACT PERSON	
ADDRESS:	
PHONE:	FAX:
NAME OF SUBDIVISION:	
LOCATION:	
SECTION NUMBER:	NUMBER OF LOTS:
SOIL CONSULTANT'S NAME:	
(This information should be available on th	e soil consultant's work)
ADDRESS:	
PHONE:	FAX:
SURVEYORS NAME:(This information should be available on the	e surveyors work)
ADDRESS:	
PHONE:	FAX:
	MES ON LAND AS SHOWN ON THE PLAT ne records for the existing home(s) or structures(s) on occupied for years, we must verify a permit or
1. Current:	
2	
3	
Λ	