APPLICATION FOR PLAN REVIEW

Town of Wake Forest Planning Department
221 Brooks Street
Wake Forest, NC 27587
(919) 554-6140 Fax: 554-6607
www.wakeforestnc.gov

Date: _____

Name of Subdivision/Development: _____
Phase: _____ Proposed Land Use: _____
Number of Lots/Units: _____ Location: _____
Acreage: _____ Tax PIN Number: _____

Applicant Information:
Name: _____ Phone Number: _____
Address: _____
_____
Email: _____

Owner Information:
Name: _____ Phone Number: _____
Address: _____
_____
Email: _____

Engineer/Architect:
Name: _____ Phone Number: _____
Address: _____
_____
Email: _____

Developer:
Name: _____ Phone Number: _____
Address: _____
_____
Email: _____

Review Procedure *(circle one):* Administrative Regular

Review Stage *(circle one):* Master/Development Plan Construction Plan Final Plat

The submitted plan shall depict or contain the information on the appropriate checklist(s).