



Subdivision Application

Department of Planning, Zoning & Wetlands P.O. Box 839, 50 Brickbat Road, Mathews, Virginia 23109
Phone: 804-725-4034 Fax: 804-725-7249 Web Site: www.mathewscountyva.gov

PROPERTY INFORMATION

MAP ID: _____ ZONING: _____

PHYSICAL ADDRESS: _____

MAGISTERIAL DISTRICT: _____

NAME OF SUBDIVISION: _____

FOR OFFICIAL USE ONLY

APPLICATION NO. _____

DATE: _____ AMOUNT: _____ CHK # _____

Approved Denied _____

Date Approved: _____

Approved By: _____

Minor Subdivision
\$100.00 + \$15 per lot

Major Subdivision
\$500.00 + \$25.00 per lot

PLEASE ATTACH SIX COPIES OF THE PLAT

PROPERTY OWNER INFORMATION

Name: _____ E-Mail: _____

Mailing Address _____ Phone: _____

City: _____ State: _____ Zip: _____

Property Owner Signature: _____

APPLICANT INFORMATION

Name: _____ E-Mail: _____

Mailing Address _____ Phone: _____

City: _____ State: _____ Zip: _____

Applicant Signature: _____

By signing above, I/we certify that I/we own the subject property or have legal power to act on behalf of the owner in filing this application. I/we also certify that the information provided on this application and accompanying information is accurate, true and correct to the best of my knowledge.

Make check payable to TREASURER, COUNTY OF MATHEWS