BURR RIDGE SUBDIVISION ORDINANCE

APPLICATION FOR SUBDIVISION APPROVAL

Name of Proposed Subdivision:

Developer: _____
(Name)

_____ _____
(Telephone #)

_____ _____
(Address) (Fax #)

Property Owner: _____
(Name)

_____ _____
(Telephone #)

_____ _____
(Address) (Fax #)

Engineer: _____
(Name)

_____ _____
(Telephone #)

_____ _____
(Address) (Fax #)

Landscape Architect: _____
(Name)

_____ _____
(Telephone #)

_____ _____
(Address) (Fax #)

PLEASE REFER TO THE SUBMITTAL CHECKLISTS FOR ADDITIONAL SUBMITTAL REQUIREMENTS

(Appendix II-A)