



SAMPSON COUNTY

PLANNING & INSPECTIONS



Planning: (910) 631-1039
Inspections: (910) 592-0146



Planning: planning@sampsoncountync.gov
Inspections: inspections@sampsoncountync.gov



Address: 335 County Complex Rd, Bldg D Clinton, NC 28328
Hours of Operation: Monday – Friday, 8am – 5pm

Submit your application and plat to: planning@sampsoncountync.gov

MINOR SUBDIVISION/ EXEMPT PLAT APPLICATION

REVIEW FEES:

MINOR/SERVICE SUBDIVISIONS: \$100 + \$25/re-review

EXEMPT PLATS: \$50 + \$25/re-review

APPLICATION TYPE

PLEASE SELECT ONE OF THE FOLLOWING:

MINOR SUBDIVISION

EXPEDITED MINOR

SERVICE SUBDIVISION

EXEMPT PLAT

PLAT INFORMATION

PLAT TITLE: _____

SITE ADDRESS/LOCATION: _____

PIN(S): _____

ZONING DISTRICT: _____ DEED BOOK/PAGE NUMBER: _____/_____

EXISTING LOTS: _____ # RESULTING LOTS: _____ TOTAL ACREAGE: _____ AC

PROPOSED WATER SERVICE (SELECT ONE): _____ PUBLIC WATER _____ PRIVATE WELLS

PUBLIC/PRIVATE STREETS (SELECT ONE): _____ PUBLIC STREETS _____ PRIVATE STREETS

PLEASE PROVIDE AN EXPLANATION OF THE INTENT OF THE PROPOSED PLAT BELOW. IF THIS IS AN APPLICATION FOR AN EXEMPT PLAT, SPECIFY THE APPLICABLE EXEMPTION IN YOUR EXPLANATION:

APPLICANT INFORMATION

APPLICANT NAME: _____

BUSINESS NAME (IF APPLICABLE): _____

CONTACT PERSON: _____

MAILING ADDRESS: _____

PHONE NUMBER: _____ EMAIL ADDRESS: _____

PROPERTY OWNER INFORMATION

PROPERTY OWNER NAME: _____

MAILING ADDRESS: _____

PHONE NUMBER: _____

EMAIL ADDRESS: _____

DEVELOPER INFORMATION

BUSINESS NAME (IF APPLICABLE): _____

CONTACT PERSON: _____

MAILING ADDRESS: _____

PHONE NUMBER: _____ EMAIL ADDRESS: _____

SURVEYOR/ENGINEER INFORMATION

BUSINESS NAME (IF APPLICABLE): _____

CONTACT PERSON: _____

MAILING ADDRESS: _____

PHONE NUMBER: _____ EMAIL ADDRESS: _____

APPLICANT SIGNATURE

I/We, _____, do hereby make application and petition to Sampson County to approve the subject plat. I hereby certify that I have full legal right to request such action and that the statements or information submitted with this application are accurate. By signing this application, I am acknowledging that I am responsible for obtaining the proper permits from Sampson County Building Inspections; Sampson County Environmental Health; North Carolina Department of Transportation; North Carolina Department of Environmental Quality; and any other state or federal agency as applicable. I understand this application, related material and all attachments become official records of the Planning Department of Sampson County, North Carolina, and will not be returned.

APPLICANT SIGNATURE

DATE