

**THE VILLAGE OF HANOVER**  
**SUBDIVISION FINAL PLAT APPLICATION**

**DATE:** \_\_\_\_\_ **APPLICATION No.** \_\_\_\_\_

1. Name of Applicant (Property Owner): \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_
2. Name of Surveyor / Engineer: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
Contact Person: \_\_\_\_\_
3. Proposed Name of Subdivision: \_\_\_\_\_
4. Total Acreage of Proposed Subdivision: \_\_\_\_\_
5. Total Number of Lots \_\_\_\_\_
6. Tentative Date for Final Plat Meeting: \_\_\_\_\_
7. Date of Preliminary Plan Approval: \_\_\_\_\_
8. Date of Construction Plan Approval: \_\_\_\_\_
9. Do you propose deed restrictions? YES or NO If yes, please attach final copy.
10. Was a zoning change requested? YES or NO If yes, the final plat may not be approved until the requested zoning is approved. Provide Proof that the zoning was approved with submittal.
11. Have all required improvements been installed and accepted? YES or NO If no, include a detailed cost estimate of cost and a statement relative to the method of improvement guarantee. All of the estimates must be approved by Village officials.
12. Final Plat Review Fee: \_\_\_\_\_ Paid: YES or NO

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**FOR STAFF USE ONLY**

Date Received: \_\_\_\_\_ Meeting Deadline Date: \_\_\_\_\_

Date of Planning and Zoning Meeting: \_\_\_\_\_

Date Sent to Village Engineer for Review: \_\_\_\_\_

Preliminary Plan Review Fee Paid: YES or No Check No. \_\_\_\_\_ Amount: \_\_\_\_\_

Action by Planning Commission:

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Date: \_\_\_\_\_ Chairman: \_\_\_\_\_