



Subdivision - Plans for Signature

Signature Plan 10-Day Expedited Process - Final Construction Plans

County of Henrico, Virginia

Department of Planning

Henrico Planning Web Site: www.co.henrico.va.us/planning

Department of Planning, County of Henrico, Virginia, P.O. Box 90775, Henrico, Virginia 23273-0775** Phone 804-501-4602 Facsimile 804-501-4379
 **Use P.O. Box for all mail. Street address is 4301 E. Parham Road, Henrico, Virginia 23228 for deliveries only.

Name of Project: _____ **SUB #** _____

o **10-Day Expedited Process Requested (No fee required)**** This is an alternative to the regular construction plans for signature process. The only Subdivision plan submission eligible for this 10-day review/signature process is the first construction plan submittal after Final Approval, provided the plans are submitted within 6 months of Final approval. This procedure is available by special request and the furnishing of all required information. **In lieu** of the six (6) sets of plans submitted to the Permit Center, submit the following information directly to each agency listed below. **All information must be submitted at the same time to each agency and all agencies must receive complete submittals on the same day.** (SEE POF 021 Appendix A for detailed description of process)

o **Department of Planning****

- Plans for Signature Application (original application) and twenty-two (22) sets of plans
- Certificate of Compliance (original)
- Planning Department Submittal Checklist (all items listed)

o **Department of Public Works****

- Plans for Signature Application (copy of original application) and three (3) sets of plans
- Certificate of Compliance (original)
- Public Works Submittal Checklist (all items listed)

o **Department of Public Utilities****

- Plans for Signature Application (copy of original application) and one (1) set of plans
- Certificate of Compliance (original)
- Public Utilities Submittal Checklist (all items listed)

For Office Use Only

****Comments due to Planning (7 days)** _____
 (Date)

Engineer/Surveyor

Name: _____

Address: _____

City/State: _____ Zip _____

E-Mail _____

Phone : _____ Fax _____

Authorized Signature _____ Print Name _____

FOR OFFICE USE ONLY

Date of Filing: _____

Time of Filing: _____

Fee: _____ PIV Number _____

Authorized Signature _____ Print Name _____

FOR OFFICE USE ONLY

Application Accepted By: _____ Fee: _____

Date of Filing: _____ Time of Filing: _____ PIV Number: _____