

# TOWN OF WINDHAM

979 Main Street Willimantic, CT 06226  
 Phone (860) 465-3045 Fax (860) 465-3039

(FOR OFFICE USE ONLY)	
File # _____	Date of Receipt _____

## SUBDIVISION PRE-APPLICATION REVIEW CHECKLIST

Name of Subdivision: \_\_\_\_\_

Name(s) of Applicant: \_\_\_\_\_

REQUIRED INFORMATION	LOCATION	VERIFIED (office use)
The following data is required in a formal subdivision application per Town of Windham Subdivision Regulations and is strongly encouraged to be available for the pre-application review :	Indicate where the information is provided, such as sheet #, or other attached report	Initial of town staff that material is submitted.
Sketch Plan Pre-Application Meeting:		
Pre-Application Form		
Site Context Map per Section 3.2.2		
Site Resource Assessment per Section 3.2.3		
Calculations of acreages and estimate of the maximum number of lots per the current zoning regulations; if site is greater than 15 acres or 5 lots, use one of the methods described in Section 6.4 to estimate maximum number of lots		
Development Bubble Map per Section 3.2.6		
Preliminary Layout Plan Pre-Application Meeting:		
Above information		
Proposed Subdivision Layout per Section 4.1.8		

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_