**FORSYTH COUNTY REQUEST FOR SUBDIVISION/ROAD NAME APPROVAL**

Note: Prior to completing this form please read and understand the Forsyth County SUBDIVISION AND ROAD NAME POLICY AND PROCEDURE located online. Click on Departments; select Engineering from All Main Departments drop down box.

\*\*Please see notation at bottom, of page\*\*

|  |  |
| --- | --- |
| **DATE SUBMITTED:** |  |
| **CONTACT NAME:** |  |
| **COMPANY NAME:** |  |
| **PHONE:** |  |
| **FAX:** |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | | | | **Yes** | **No** |
| **PROPOSED** |  | | **ENG** |  |  |
| **SUBDIVISION NAME:** |  | | **911** |  |  |
| IF NO, THE REASON (to be completed by the reviewer): | |  |  |  |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **ALTERNATE**  **NAME:** |  | | **ENG** |  |  |
| **911** |  |  |
| IF NO, THE REASON (to be completed by the reviewer): | |  | | | |

|  |  |
| --- | --- |
| **PROPERTY LOCATION:** (required) |  |
| **PROPERTY ZIP CODE:** (required) |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **PROPOSED ROAD NAMES** | | **APPROVAL** | | | **COMMENTS** |
| **ENG** | | **911** |
|  | | Y  N | | Y  N |  |
|  | | Y  N | | Y  N |  |
|  | | Y  N | | Y  N |  |
|  | | Y  N | | Y  N |  |
|  | | Y  N | | Y  N |  |
|  | | Y  N | | Y  N |  |
| Date Submitted to 911: |  | | Misc. Comments: | | |
| Date Returned to Engineering: |  | |  | | |

\*\*PLEASE RETURN COMPLETED FORM BY E-MAIL TO [kareilly@forsythco.com](mailto:kareilly@forsythco.com) OR BY FAX TO (770) 781-2104 Revised 03-19-24 IST