FORT OGLETHORPE	FORT OGLETHORPE ADVISORY BOARI APPLICATION FOR LAND SUBDIVISION APPROVAL THE APPLICATION FEE MUST ACCOMPANY THIS APPLICATION	
GEORGIA		
CASE NUMBER:	Date Received:	Application Fee:

PLANNING ADVISORY BOARD HEARING DATE:	Time:
This box is to be filled out by City of Fort Oglethorpe staff	
Owner's Name:	

Owner's Name:	
Mailing Address	
City/State/Zip:	
Phone:	Email:
Location of Property:	
Tax Parcel: #	Current Zoning:
Number of Lots:	Total Acreage:
Type Approval Requested	(Preliminary, Final):
Surveyor's Name:	
I swear under penalty of law	v that within information is true, correct, and complete
Owners Signature:	Date:
Planning Commission Decision:	
	<i>is to be filled out by City of Fort Oglethorpe staff</i> the 5th of the month to be considered for the
PLANNING ADVISORY BOAR	D MEETING of the following month.
	DARD decision in a variance matter will be a cil who will make the final decision. Withdrawals prior to a by the applicant.

Attendance at the planning advisory board meeting is strongly encouraged. Failure to attend may result in a denial of your application/request. If you are unable to attend, it's recommended that you find a representative in your place to answer any questions the board may have. Please contact the building official as soon as possible if you or your representative are unable to attend.

Building Official: Office 706-866-2544 ext.1206 Cell 423-779-8222

DISCLOSURE OF CAMPAIGN CONTRIBUTIONS

(Required by Title 36, chapter 67A. Official Code of GA Annotated)

Reference: Application	on filed on	; to
Rezone real property	described as follows:	

Within the two (2) years preceding the above filing date, the applicant has made campaign contributions aggregating \$250.00 or more to any member of the City Council of the City of Fort Oglethorpe who will consider the application.

() No, I have not made any contributions as described above.

() Yes, I have made contributions as described above.

Dollar Amount:______

I hereby depose and say that all statements herein are true, correct, and complete to the best of my knowledge and belief.

Signature of Applicant

Sworn to and subscribed before me this ____day of _____, ____,

Notary Public, Georgia State at Large

My Commission Expires:_____

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PROPERTY OWNER AUTHORIZATION

Instructions: Each property owner <u>must</u> complete and sign a **Property Owner Authorization** page and provide the information requested under the **Owner Information Certification** section. In the event there is more than one property owner, a separate **Property Owner Authorization** page <u>must</u> be completed by <u>each</u> property owner.

OWNER INFORMATION CERTIFICATION

I swear that I am the owner of the property which is the subject matter of this application, as shown in the records of Georgia:

Name of Owner:	
Owner's Address:	
City/State/Zip Code:	
Owner's Phone Number:	
Owner's Cell Phone Number:	
Print Owner's Name:	

As the owner of the subject property I hereby authorize the person named below to act on my behalf as Applicant in the pursuit of a <u>subdivision</u> for this property.

NOTARY PUBLIC CERTIFICATION

Instructions: All **Property Owner Authorization** sheets <u>must</u> be complete, signed and duly notarized.

NOTARY PUBLIC CERTIFICATION

Personally appeared before me the following

Signature of Owner

Who swears that the information contained in this authorization is true and correct to the best of his or her knowledge and belief

Notary Public

Date

SUBDIVISION CHECKLIST

- Application filed by the 5th of the month to be considered for the Planning Commission meeting the following month.
- Written legal description of property (e.g. copy of deed) full metes and bounds description and if available plat showing property lines with lengths and bearings, adjoining streets, locations of existing buildings, north arrow and to scale. Submit seven (7) copies if plat is 11" X 17" or smaller. Plat larger than 11" X 17", submit sixteen (16) copies.
- Disclosure of Campaign Contributions and Gifts form.
- If property owner and applicant are not the same, Authorization by Property Owner form.

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• Payment of filing fee to the city of Fort Oglethorpe.

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PRELIMINARY PLAT APPROVAL PROCEDURES

NOTE: Prior to preliminary plat submittal, it is advisable for the developer to discuss lot and road designs with the applicable street department, sewer management, water service, fire protection, Environmental Health Department, zoning and building requirements.

The application for preliminary plat approval, including seven prints of complete subdivision plans, shall be submitted to the planning commission office at least 15 days prior to the planning commission's regularly scheduled meeting.

Preliminary Plat Specifications. The preliminary plat shall be prepared by a Georgia Registered Land Surveyor. The plat shall be drawn at a scale not smaller than one hundred (100) feet to one (1) inch. The plat shall include:

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Preliminary	Final
X	X
x	X
x	x
x	x
x	x
x	x
x	x
X	x
X	x
	X
X	X
	X X X X X X X X X X X X X

Typical street cross section	X	
Block and lot lines	X	X
Block and lot numbers		x
Setback lines	x	x
Existing utilities and possible connections	X	
Proposed improvements requested of the city (utility extensions)	X	
Proposed utility plans (water supply, sanitary sewage and storm drainage)	X	X
Dimensions (lots, roads)		X
Bearings and monuments		x
Contours at 5-foot intervals	x	
Present zoning	x	
Adjoining property names	X	
Certificates as required		x
Location of proposed open spaces	x	
Areas of periodic inundation	x	x

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