

City of Bainbridge

Planning & Development Department
P.O. Box 158
Bainbridge, Georgia 39818
(229) 248-2000 Phone/(229) 248-2008 Fax
www.bainbridgecity.com

For Planning & Development office use only
Filed: _____

Development Permit Application

Name of Project: _____

- Preliminary Plat (Residential)
- Site Plan (Commercial)
- Preliminary Plat (Commercial)

- Final Plat (Residential)
- Final Plat (Commercial)
- Other: _____

1. Applicant(s):

Check one: Owner Agent Lessee Contract Purchaser Developer Other _____

NAME: _____

NAME: _____

ADDRESS: _____

ADDRESS: _____

PHONE #: _____

PHONE #: _____

FAX #: _____

FAX #: _____

E-MAIL: _____

E-MAIL: _____

2. Property Owner(s):

NAME: _____

NAME: _____

ADDRESS: _____

ADDRESS: _____

PHONE #: _____

PHONE #: _____

FAX #: _____

FAX #: _____

E-MAIL: _____

E-MAIL: _____

3. Project Engineer/Design Professional and Surveyor:

Project Engineer/Design Professional:

Project Surveyor (if applicable):

NAME: _____

NAME: _____

ADDRESS: _____

ADDRESS: _____

PHONE #: _____

PHONE #: _____

FAX #: _____

FAX #: _____

E-MAIL: _____

E-MAIL: _____

4.

Site Information:

If only part of a parcel is included, then write "Part" after the Decatur County Tax Map & Parcel number(s).

Property Owner(s):

Decatur County Tax Map & Parcel Number(s)

Address(es) or general street location from closest street intersection: _____

Area (acres or sq. ft.): _____

Current Zoning (including overlay districts, if any): _____

If current zoning classification is a zoning with conditions, please attach a copy of the existing conditions of the zoning.

5.

Attachments:

Nine (9) copies of Site Plan Package (folded to 8 1/2" x 11")

The undersigned states the above information is true and correct as (s)he is informed and believes. I would like to have Staff Comments sent to me via:

Fax E-mail U.S. Mail.

I understand that all Staff Comments will also be sent to all others named on the application.

Signature(s) of Applicant(s):

Date:

FOR PLANNING & DEVELOPMENT OFFICE USE ONLY

Date Filed: _____

Date Complete: _____

Amount Paid: _____

Received By: _____

Incomplete Notice Sent: _____

Reason Incomplete: _____
