Check Applicable Type



Chief Executive Officer

DEPARTMENT OF PLANNING & SUSTAINABILITY

Interim Director

Lorraine Cochran-Johnson

Cedric Hudson

DEVELO)PMENT	PERMIT	APPLI(CATIC)N

Date:APPLICATION FEES				Residential *Condo Stack Fla						
				Non-Residential Apartments		→ Condo Townhouse → Townhouse Fee Simple				
Ref	er to link for fe	es: https://w	ww.dekalbco	ountyga.gov/	planning	-and-sus	tainability	/new-fee	-schedule	
			•	t Manual for	•					
Subdivision plans		-		of the appro	oved si	gned sl	ketch pla	ıt.		
Application (Shade	ed area for o	ffice use or	ılyj							
Development Permit AP #	‡				Date App	lication F	rocessed			
Date Development Permi	t Issued				Project U	se				
Project Name					Phase/Ui	nit				
Disturbed Acreage					Scope of					
Site/Property(Appl	icant)									
Address/Parcel ID					City			State		Zip
Building No.					Apartment/Suite No.					
Applicants (Applican	t)									
Property Owner				Site Contractor						
Address		T			Address					.
City	State	Z	IP		City	State Z		ZIP		
Tel #		Mobile #			Tel#	ha sa u la sa a				
Fax #		E- Mail			Fax #		Mobile #	-	E- Mail	
Site Developer					Site Desig	gner/Eng	ineer			
Address					Address					
City	State	Z	IP		City			State		ZIP
Tel #					Tel #					
Fax # E Mail			Fax # E Mail							
Project Information	(Applicant)		hr 1 65				0 77	A	Ti à	
Number of Buildings			Number of St	tories			Gross Floo	r Area (Sq	. Ft.)	
Site Acreage	Number of	Units	•		Sewer		•		Septic	
Disturbed Acreage	% of Area	mpervious		Impervious A	Area (sq f	t)	No. of	Lots	I	
			(Co	ntinued on Pa	age 2)					



DEPARTMENT OF PLANNING & SUSTAINABILITY

The Applicant shall be responsible from the date, or from the time of the beginning of the first work, whichever shall be the earlier, for all injury or damage of any kind resulting from this work, whether for basic services or additional services, to persons or property.

Project Summary/Scope of Work:						
The applicant shall exonerate, indemnify and save harmle incidental to the defense (including death) to persons or p this permit or by conditions created thereby or arising out for any and all claims for damages under the laws of the laws of the acquisition of and construction under the permit and sand all claims, litigations, and actions suffered through a directly or indirectly employed under the supervision of an	roperty caused by or sustained in or of or any way connected with the valued States or of Georgia arising of Shall assume and pay for, without cany act or omission of the application.	connection wi work performe out of or in an ost to the Cou	th the performance of ed under the permit or y way connected with nty, the defense of any			
I hereby certify that I have examined and understand al information supplied by me are true and correct to the bowork to be performed shall be complied with whether spec	est of my knowledge. All provision					
Owner's Signature:	Date:					
Owner's Signature (printed):						
Company Name:	Phone Number:					
Address:	City:	State:	ZIP:			
Which of the following apply to the project and have t	hey been addressed?					
Storm Water Report?	☐ Yes		□ No			
Flood Plain?	☐ Yes		☐ No			
Will there be grading In the Flood Plain?	☐ Yes		☐ No			
Conditions of Zoning?	☐ Yes		☐ No			
Copy of State DNR Application?	☐ Yes		□ No			
Owners Indemnification?	☐ Yes		☐ No			
Paid Ad Valorem Tax Statement?	☐ Yes		□ No			
Are supporting documents provided for these items	☐ Yes		□ No			
Approved Administrative Variance?	☐ Yes		□ No			
Approved BOA?	☐ Yes		□ No			
Approved Sketch Plat?	☐ Yes		□ No			
Approved Special Land Use Permit?	☐ Yes		☐ No			
Is there a New Fireline or Relocated Fireline propose?	☐ Yes		□ No			
If yes, provide 6 sets of Site & Utility plans for a Fireline review	ew (size of fireline:					
Does the Property front on GDOT R-O-W? If yes, submit to GDOT	☐ Yes		□ No			