



## PLANNING AND DEVELOPMENT DEPARTMENT LAND DISTURBANCE PERMIT APPLICATION & PROCEDURES

Note: Application must be submitted fully along with all application fees. Failure to submit a completed application will delay the process, and may result in the refusal of the application. The City of Statham has up to five (5) business days to review all applications submitted for sufficiency.

Applicant Name/Address

Property Owner Name/Address

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Phone: \_\_\_\_\_

Phone: \_\_\_\_\_

E-Mail: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Zoning District: \_\_\_\_\_ Name of Project/Subdivision Name: \_\_\_\_\_

Project Address: \_\_\_\_\_

Date Final Plat was Approved: \_\_\_\_\_ Tax Map/Parcel Number: \_\_\_\_\_

Total Acreage: \_\_\_\_\_ Acreage and Square Footage to be Disturbed: \_\_\_\_\_

Intended Start Date: \_\_\_\_\_ Intended End Date: \_\_\_\_\_

Description of Proposed Project:

\_\_\_\_\_  
\_\_\_\_\_

I hereby certify that the above information and all attached information are true and correct.

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_

### Staff Use Only

Application Received Date: \_\_\_\_\_ Accepted by: \_\_\_\_\_

Fee: \_\_\_\_\_ Reference: \_\_\_\_\_ Date Paid: \_\_\_\_\_

Notes: \_\_\_\_\_

Approved Date: \_\_\_\_\_ Denied/Reason: \_\_\_\_\_