



310 Technology Parkway
 Peachtree Corners, GA 30092
 Tel: 678.691.1200 | www.peachtreecornersga.gov

<u>Staff Use:</u> Date: _____ Permit No: _____ Fee: \$ _____

Land Disturbance REVISION Permit Application

Date: _____	Total Site Acreage: _____
# of Lots / Units: _____	Proposed Disturbed Acreage: _____
Development Name: _____	Existing Impervious Acreage: _____
Project Address: _____	Proposed Impervious Acreage: _____
Description of Proposed Revision: _____	

Check all the following that apply:

- | | |
|--|---|
| <input type="checkbox"/> New Single-Family Development | <input type="checkbox"/> Stream Buffers/Floodplain/Wetlands |
| <input type="checkbox"/> New Multi-Family Development | <input type="checkbox"/> Land Disturbance > 5,000 sq. ft. |
| <input type="checkbox"/> New Commercial Development | <input type="checkbox"/> Within River Corridor |
| <input type="checkbox"/> Redevelopment | <input type="checkbox"/> Other: _____ |

Possible Additional Permits:

- | |
|---|
| <input type="checkbox"/> Demolition |
| <input type="checkbox"/> Retaining Wall (over 4') |
| <input type="checkbox"/> Other: _____ |

Development Plan Submittal Types	Fee
LDP Plan Revision Fee	\$250

Applicant Information: Check if recipient would like a copy of all comments sent

Name: _____	Company: _____
Email: _____	Phone: _____
Address: _____	

Engineer Information: Check if recipient would like a copy of all comments sent

Name: _____	Company: _____
Email: _____	Phone: _____
Address: _____	

Owner Information: Check if recipient would like a copy of all comments sent

Name: _____	Company: _____
Email: _____	Phone: _____
Address: _____	

I hereby certify that all information provided herein is true and correct

Property Owner/Owner's Representative Signature: _____ Date: _____