



**APPLICATION FOR
SINGLE-FAMILY DWELLING, BUILDING ADDITION,
ACCESSORY BUILDING, SWIMMING POOL, OR DUPLEX**

THIS SPACE FOR OFFICE USE ONLY

USE TYPE: (check one) CU PU CU w/SPR PU w/SPR

PROPOSED USE: _____

MAP/ PARCEL NUMBER: _____ DISTRICT: _____ PERMIT NUMBER: _____

REFERENCE OTHER PERMITS: _____

SETBACKS: Front: _____ Side: _____ Side: _____ Rear: _____ VARIANCES: _____

AGENDA DATE (If applicable): _____

RECEIPT NUMBER: _____ AMOUNT: \$ _____ DATE: _____

APPROVED BY: _____ DATE: _____

CONDITIONS OF APPROVAL: _____

PLEASE PRINT LEGIBLY

DATE: _____

1. This Application is for: (Please check applicable)

- | | |
|---|--|
| <input type="checkbox"/> NEW SINGLE-FAMILY DWELLING | <input type="checkbox"/> BUILDING ADDITION |
| <input type="checkbox"/> ACCESSORY BUILDING | <input type="checkbox"/> SWIMMING POOL |
| <input type="checkbox"/> NEW DUPLEX | <input type="checkbox"/> FENCE |

2. Street Address of property: _____
City _____ State _____ Zip _____

3. Applicant's Name: _____

4. Applicant's Mailing Address: P. O. Box _____
Street Address _____
City _____ State _____ Zip _____

5. E-mail address for primary contact (required) _____

PLEASE NOTE: When possible, any correspondence for an agenda item will be by email.

6. Name of Owner or Property Manager: _____

7. Applicant's Daytime Phone Number: _____-_____-_____

8. Is this property on Public Sewer? or Septic Tank?

PLEASE NOTE: Septic Tank approval from the Health Department is needed for all new construction projects not connected to public sewer.

9. What is the height of the proposed dwelling measured from the ground to the ridge line of the roof? _____ft.
10. What is the size of the property? Number of acres _____ **or** Number of square feet _____
11. Is there a creek, stream, or major drainage way on this property? Yes No
12. Is this property or a portion thereof located in an established 100-year flood plain? Yes No
13. **At the bottom of this form, or on a separate sheet of paper, provide a drawing that shows the following information:**
- (A) The shape of the entire lot, including the location of streets adjacent to the property.
 - (B) The location of all buildings, existing and proposed, including the setback of each building from the property lines.
 - (C) The location of any streams, creeks, or easements.

PLEASE READ, SIGN AND DATE

This application does not violate any restrictive covenants applicable to the property and all statements are true to the best of my knowledge and belief. I realize that distances should be exact and if errors result in a violation of zoning regulations, then the structure will have to be removed.

As applicant, I hereby grant permission for Planning and Zoning personnel to enter upon and inspect the property for all purposes allowed and required by the Comprehensive Land Development Resolution for Macon-Bibb County, Georgia.

I hereby attest that I am the owner of the referenced property or have permission from the owner to make this application.

SIGNATURE _____ DATE _____

**Please make checks payable to Macon-Bibb County Planning and Zoning Commission
If you have any questions and or concerns please contact us at info@mbpz.org**