



APPLICATION FOR LAND SUBDIVISION
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NOTICE: Beginning September 1, 2019, before making an application for land subdivision, consultation with the Concept Review Committee (CRC) is now required (please refer to adopted legislation, 19-R-3750. Please follow this link for additional details:

<https://www.atlantaga.gov/government/departments/city-planning/concept-review-committee>

DATE RECEIVED _____	
DATE FILED _____	APPLICATION NUMBER: SD - ____ - _____
NAME OF APPLICANT _____	PHONE NUMBER: _____
NAME OF COMPANY _____	CELL NUMBER: _____
	FAX NUMBER: _____
E-MAIL ADDRESS _____	
STREET ADDRESS _____	
CITY _____	STATE _____ ZIP CODE _____
IF MORE THAN ONE OWNER, LIST ADDITIONAL OWNERS ON A SEPARATE SHEET	
NAME OF OWNER _____	
STREET ADDRESS _____	
CITY _____	STATE _____ ZIP CODE _____
DESCRIPTION OF PROPERTY	
ADDRESS OF PROPERTY _____	
No. of Lots to be Created _____	Zoning _____
Land Lot _____	District _____
Council District _____	Neighborhood Planning Unit (s) _____
<p>I HEREBY REQUEST approval of the subdivision of the subject property according to the plans, which are submitted as a part of the application.</p> <p>I HEREBY AUTHORIZE the staff of the City of Atlanta to inspect the premise of the above described property.</p> <p>I HEREBY SWEAR AND AFFIRM that all statements contained herein and attached hereto are true and correct to the best of my knowledge and belief.</p>	
Owner or Agent for Owner (Applicant) _____	
Sworn to and subscribed before me this _____ day of _____, 20____	
_____ Notary Public	

AFFIDAVIT

**AUTHORIZATION BY PROPERTY OWNER
APPLICATION FOR LAND SUBDIVISION
CITY OF ATLANTA, GEORGIA**

I swear that I am the owner of _____
State addresses or parcel ID numbers of all properties involved with this request
_____, which is the subject of the
attached application for land subdivision, and is(are) shown in the records of
_____ County, Georgia.

I authorize the person named below to act as my agent in the pursuit of this application for
the subdivision of the subject property.

NAME OF APPLICANT _____

ADDRESS OF APPLICANT _____

APPLICANT'S TELEPHONE NUMBER _____

APPLICANT'S EMAIL ADDRESS _____

NAME OF OWNER _____

SIGNATURE OF OWNER _____

NOTARIAL STATEMENT FOR PROPERTY OWNER

Sworn to and subscribed before me this _____ day of
_____, 20_____

Notary Public