

CITY OF EATONTON
PLANNING AND DEVELOPMENT
117 PUTNAM DR. SUITE B
EATONTON, GA 31024

PHONE: 706-485-2776
FAX: 706-485-0552

REQUEST FOR FINAL PLAT SUBDIVISION INSPECTION

THE UNDERSIGNED HEREBY REQUESTS AN INSPECTION OF SUBDIVISION FOR FINAL PLAT APPROVAL.

APPLICANT: _____

ADDRESS: _____

PHONE: _____

PROPERTY OWNER IS DIFFERENT FROM ABOVE: _____
ADDRESS: _____

PHONE: _____

PROPERTY:

SUBDIVISION NAME: _____

LOCATION: _____

MAP _____ PARCEL _____ NUMBER OF ACRES _____

SUPPORTING INFORMATION ATTACHED TO APPLICATION:

_____ RED-LINED PRELIMINARY PLAT (2 COPIES)

_____ CONSTRUCTION PLANS

_____ COVENANTS

_____ FILING FEE (\$100.00 CHECK NO. _____)

*SIGNATURE OF APPLICANT: _____ DATE: _____

*APPLICANT HEREBY AFFIRMS THAT APPLICANT IS THE PROPERTY OWNER OR HAS THE LEGAL AUTHORITY TO SIGN THIS FORM ON OWNER'S BEHALF AND APPLICANT AGREES TO INDEMNIFY AND HOLD THE CITY OF EATONTON HARMLESS IN THE EVENT IT IS DETERMINED APPLICANT DOES NOT HAVE SUCH LEGAL AUTHORITY.

OFFICE USE: DATE FILED: _____ INSPECTED BY: _____ DATE: _____

COMMENTS: _____

