



# PUTNAM COUNTY PLANNING & DEVELOPMENT

117 Putnam Drive, Suite B ♦ Eatonton, GA 31024

Tel: 706-485-2776 ♦ 706-485-0552 fax ♦ www.putnamcountyga.us

Complete application packets may be submitted to [Pdsubmittals@putnamcountyga.us](mailto:Pdsubmittals@putnamcountyga.us)  
**INCOMPLETE APPLICATIONS WILL NOT BE PROCESSED.**

## **MB 202** **"MINOR" BUFFER DISTURBANCE**

Any property owner, representative, agent of the owner, or contractor wishing to enter or cross the twenty-five (25) foot buffer zone to construct or enlarge seawalls shall be responsible for maintaining the buffer zone according to the standards set by Georgia Power Company, the Georgia Water and Soil Conservation Commission (GWSCC), and this Putnam County Local Issuing Authority (LIA).

**Provisions Shall be Made** to maintain "Best Management Practices" as set by the GWSCC during the entire land disturbance activity from the beginning to the final inspection, at which time permanent vegetation shall be in place at the site.

It **Shall be Prohibited and Unlawful** within the twenty-five (25) foot buffer to remove trees, grade to the bare ground, (except shaping and filling at the shoreline for seawall construction), remove embedded stone boulders, or any other land disturbance activity that will upset the natural balance within this buffer zone.

Application is hereby made for a "Minor" Buffer Disturbance Authorization to enter, cross, or work in the twenty-five (25) foot established buffer zone.

**Upon Completion of Project; Contractor/ Agent/ is Required to Call for a final Site Inspection.**

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Property Owner: \_\_\_\_\_

Property Address: \_\_\_\_\_ District: \_\_\_\_\_ Total Acreage: \_\_\_\_\_

Map: \_\_\_\_\_ Parcel: \_\_\_\_\_ Zoning: \_\_\_\_\_

Owners phone Number: \_\_\_\_\_

Work To Be Done: \_\_\_\_\_

Anticipated Start Date: \_\_\_\_\_ Date of Completion: \_\_\_\_\_

Contractor, or Agent: \_\_\_\_\_

Contractor's 24 hr. Contact# \_\_\_\_\_

GWSCC Level 1 Certification Number: \_\_\_\_\_

Contractor/Agent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Local Issuing Authority Representative: \_\_\_\_\_ Date: \_\_\_\_\_

**Documentation Received:** GWSCC Level 1A Certification Card \_\_\_\_\_ Project Drawings \_\_\_\_\_

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**Office Use Only**

Fees: \$70.00 Check#: \_\_\_\_\_ Cash: \_\_\_\_\_ CC: \_\_\_\_\_ Receipt# \_\_\_\_\_