

Submitted Date: _____
DRCC Date: _____
Data Entry Date: _____
(Staff Use Only)

GWINNETT COUNTY
Department of Planning & Development
One Justice Square
446 West Crogan Street, Suite 150
Lawrenceville, Georgia 30046
Phone: 678.518.6000 Fax: 678.518.6240
www.gwinnettcountry.com

LDP No.: _____
PRJ No.: _____
(Staff Use Only)

Land Disturbing Permit (LDP) & Plan Review Application
√ Only One: **Clearing Only** **Clearing & Grubbing Only** **Grading Only**
(April 2015)

Please type or print legibly using blue or black ink. Incomplete applications cannot be accepted.

Project or Subdivision Information

Project or Subdivision Name: _____ **Unit:** _____ **Phase:** _____ **Pod:** _____

Address or Location: _____

Project Description: _____

District (s): _____ **Land Lot (s):** _____ **Parcel (s):** _____ **MRN:** _____

Zoning: _____ **Zoning/SUP Case No(s):** _____

Total Acres: _____ **Total Disturbed Acres:** _____ **Floodplain Acres:** _____

Sanitary Service (√ One): Sewer Septic

Watershed Information (√ One): Alcovy River Big Haynes Creek Chattahoochee River N/A

Developer Information
(The developer will receive comments from the County via email)

Developer (Company) Name: _____

Address: _____

City: _____ **State:** _____ **Zip Code:** _____

Phone: _____ **Fax:** _____ **Email:** _____

Contact Person's Name: _____ **Phone:** _____

Developer Signature: _____ **Date Signed:** _____

Developer Printed Name: _____

Property Owner Information

√ Only One: **Current Property Owner** **Proposed Property Owner**

Property Owner (Company) Name: _____

Address: _____

City: _____ **State:** _____ **Zip Code:** _____

Phone: _____ **Fax:** _____ **Email:** _____

Contact Person's Name: _____ **Phone:** _____

Project Name: _____

Applicant/ Authorized Registered Professional Information

(The Authorized Registered Professional will receive comments from the County via e-mail)

Authorized Registered Professional (Company) Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Fax: _____ Email: _____

Contact Person's Name: _____ Phone: _____

Authorized Registered Professional Signature: _____ **Date Signed:** _____

Authorized Registered Professional Printed Name: _____

Project Name: _____

***** **Application for Plan Review Completeness Checklist:** *****
CLEARING ONLY PERMIT (LDP)

Authorized Registered Professional:

Please √ each below to determine completeness of the application for plan review:

- | | |
|--|---|
| 1. <input type="checkbox"/> Complete Application Form [] | Management Note, and if applicable, detention areas shown [] |
| 2. <input type="checkbox"/> Plan Review Fee [] | |
| 3. <input type="checkbox"/> Compact Disc in a protective case with plans in PDF format [] | 11. <input type="checkbox"/> Gwinnett County Standard State Waters Buffer Note, and if applicable, streams and stream buffers shown [] |
| 4. <input type="checkbox"/> 1 copy of the Specimen Tree Survey [] | 12. <input type="checkbox"/> 6 copies of Concept Plan (<i>must be an approved Concept Plan if project is a subdivision</i>) [] |
| 5. <input type="checkbox"/> 1 copy of the Specimen Tree Concept Plan [] | 13. <input type="checkbox"/> 6 copies of Tree Preservation and/or Replacement Plan [] |
| 6. <input type="checkbox"/> 1 copy of Site Inspection Report is enclosed. (Report is provided to you following inspection of specimen trees by a certified arborist from the County. Call 678.518.6000, to request your inspection.) [] | 14. <input type="checkbox"/> 6 copies of Clearing Plan [] |
| 7. <input type="checkbox"/> 1 copy of all applicable Storm Water Management Checklists, <u>ANNOTATED TO INDICATE INFORMATION ON PLANS</u> [] | 15. <input type="checkbox"/> 6 copies - Erosion & Sediment Control Plan [] |
| 8. <input type="checkbox"/> Gwinnett County Standard Floodplain Note, and if applicable, floodplain areas shown [] | 16. <input type="checkbox"/> 1 copy of Storm Water Management Report [] |
| 9. <input type="checkbox"/> Gwinnett County Standard Wetlands Note, and if applicable, wetland areas shown [] | Or, |
| 10. <input type="checkbox"/> Gwinnett County Standard Storm Water | 17. <input type="checkbox"/> Signed and sealed letter outlining stormwater management off-site or exempt (in compliance with UDO Title 3, Section 800-40.3) [] |

Authorized Registered Professional Signature

Date

***** **Application for Plan Review Completeness Checklist:** *****
CLEARING & GRUBBING ONLY PERMIT (LDP)

Authorized Registered Professional:

Please √ each below to determine completeness of the application for plan review:

- | | |
|--|---|
| 1. <input type="checkbox"/> Complete Application Form [] | Management Note, and if applicable, detention areas shown [] |
| 2. <input type="checkbox"/> Plan Review Fee [] | |
| 3. <input type="checkbox"/> Compact Disc in a protective case with plans in PDF format [] | 11. <input type="checkbox"/> Gwinnett County Standard State Waters Buffer Note, and if applicable, streams and stream buffers shown [] |
| 4. <input type="checkbox"/> 1 copy of the Specimen Tree Survey [] | 12. <input type="checkbox"/> 6 copies of Concept Plan (<i>must be an approved Concept Plan if project is a subdivision</i>) [] |
| 5. <input type="checkbox"/> 1 copy of the Specimen Tree Concept Plan [] | 13. <input type="checkbox"/> 6 copies of Tree Preservation and/or Replacement Plan [] |
| 6. <input type="checkbox"/> 1 copy of Site Inspection Report is enclosed. (Report is provided to you following inspection of specimen trees by a certified arborist from the County. Call 678.518.6000, to request your inspection.) [] | 14. <input type="checkbox"/> 6 copies of Clearing & Grubbing Plan [] |
| 7. <input type="checkbox"/> 1 copy of all applicable Storm Water Management Checklists, <u>ANNOTATED TO INDICATE INFORMATION ON PLANS</u> [] | 15. <input type="checkbox"/> 6 copies of Existing Sewer & Water Plan [] |
| 8. <input type="checkbox"/> Gwinnett County Standard Floodplain Note, and if applicable, floodplain areas shown [] | 16. <input type="checkbox"/> 6 copies - Erosion & Sediment Control Plan [] |
| 9. <input type="checkbox"/> Gwinnett County Standard Wetlands Note, and if applicable, wetland areas shown [] | 17. <input type="checkbox"/> 6 copies of Storm Water Management Plan [] |
| 10. <input type="checkbox"/> Gwinnett County Standard Storm Water | 18. <input type="checkbox"/> 1 copy of Storm Water Management Report [] |
| | Or, |
| | 19. <input type="checkbox"/> Signed and sealed letter outlining stormwater management off-site or exempt (in compliance with UDO Title 3, Section 800-40.3) [] |

Authorized Registered Professional Signature

Date

Project Name: _____

***** **Application for Plan Review Completeness Checklist:** *****
GRADING ONLY PERMIT (LDP)

Authorized Registered Professional:

Please check each below to determine completeness of the application for plan review:

- | | |
|--|---|
| 1. <input type="checkbox"/> Complete Application Form [] | Management Note, and if applicable, detention areas shown [] |
| 2. <input type="checkbox"/> Plan Review Fee [] | 11. <input type="checkbox"/> Gwinnett County Standard State Waters Buffer Note, and if applicable, streams and stream buffers shown [] |
| 3. <input type="checkbox"/> Compact Disc in a protective case with plans in PDF format [] | 12. <input type="checkbox"/> 6 copies of Concept Plan (<i>must be an approved Concept Plan if project is a subdivision</i>) [] |
| 4. <input type="checkbox"/> 1 copy of the Specimen Tree Survey [] | 13. <input type="checkbox"/> 6 copies of Tree Preservation and/or Replacement Plan [] |
| 5. <input type="checkbox"/> 1 copy of the Specimen Tree Concept Plan [] | 14. <input type="checkbox"/> 6 copies of Grading Plan [] |
| 6. <input type="checkbox"/> 1 copy of Site Inspection Report is enclosed. (Report is provided to you following inspection of specimen trees by a certified arborist from the County. Call 678.518.6000, to request your inspection.) [] | 15. <input type="checkbox"/> 6 copies of Existing Sewer & Water Plan [] |
| 7. <input type="checkbox"/> 1 copy of all applicable Storm Water Management Checklists, <u>ANNOTATED TO INDICATE INFORMATION ON PLANS</u> [] | 16. <input type="checkbox"/> 6 copies - Erosion & Sediment Control Plan [] |
| 8. <input type="checkbox"/> Gwinnett County Standard Floodplain Note, and if applicable, floodplain areas shown [] | 17. <input type="checkbox"/> 6 copies of Storm Water Management Plan [] |
| 9. <input type="checkbox"/> Gwinnett County Standard Wetlands Note, and if applicable, wetland areas shown [] | 18. <input type="checkbox"/> 1 copy of Storm Water Management Report [] Or, |
| 10. <input type="checkbox"/> Gwinnett County Standard Storm Water | 19. <input type="checkbox"/> Signed and sealed letter outlining stormwater management off-site or exempt (in compliance with UDO Title 3, Section 800-40.3) [] |

Authorized Registered Professional Signature

Date

***** **Gwinnett County Development Review Coordinating Committee Use Only Below** *****

Application is **COMPLETE** and is **ACCEPTED** for Plan Review

Application is **NOT** complete and is **REJECTED** for Plan Review for the following reasons:

1. _____

2. _____

By: _____
Sewer & Water Plan Review-Planning & Development

By: _____
Storm Water Plan Review -Planning & Development

3. _____

4. _____

By: _____
Building Plan Review-Planning & Development

By: _____
Development Plan Review-Planning & Development

5. _____

6. _____

By: _____
Traffic & Operations – Transportation

By: _____
Other:

Authorized Registered Professional Contacted By: _____ Date: _____ Time: _____

(To Be Contacted Only If Submittal Is Rejected)