

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

STC No.: _____
(Staff Use Only)

Specimen Tree Concept Plan (STC) Plan Review Application
(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: _____ Rezoning/SUP Case No(s): _____

Total Acres: _____ Total Disturbed Acres: _____

Sanitary Service (√ One): Sewer Septic **Overlay District** (√ One): Yes No

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: _____

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/Certified Arborist/Registered Forester Information

(The Applicant/Authorized Registered Professional/Certified Arborist/Registered Forester will receive comments from the County via e-mail)

Design Professional (Company) Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Fax: _____ Email: _____

Contact Person's Name: _____ Phone: _____

Applicant/Professional Signature: _____ Date Signed: _____

Applicant/Professional Printed Name: _____

***** **Application for Plan Review Completeness Checklist: Specimen Tree Concept Plan** *****

Authorized Registered Professional/Certified Arborist/Registered Forester:

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

- | | |
|--|--|
| 1. <input type="checkbox"/> Complete Application Form [] | listed and shown on plan [] |
| 2. <input type="checkbox"/> Plan Review Fee [] | 13. <input type="checkbox"/> Standard Note is listed on plan: "This plan is conceptual in nature and does not constitute approval for construction or development. Additional regulations shall apply prior to permit issuance." [] |
| 3. <input type="checkbox"/> Compact Disc in a protective case with plans in PDF format [] | 14. <input type="checkbox"/> Project name(s) both current & former [] |
| 4. <input type="checkbox"/> 1 copy of the Specimen Tree Concept Plan [] | 15. <input type="checkbox"/> Location map & north arrow [] |
| 5. <input type="checkbox"/> 1 copy of the Specimen Tree Survey [] | 16. <input type="checkbox"/> Property boundary lines with tie point [] |
| 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.) [] | 17. <input type="checkbox"/> Land district, land lot and tax parcel number of property [] |
| 7. <input type="checkbox"/> Size of each specimen tree is provided [] | 18. <input type="checkbox"/> Property Zoning District [] |
| 8. <input type="checkbox"/> Common name for each specimen tree is provided [] | 19. <input type="checkbox"/> Rezoning/SUP or CIC case number and conditions are on plans [] |
| 9. <input type="checkbox"/> Critical root zones for each specimen tree are shown [] | 20. <input type="checkbox"/> Adjacent property lines & zoning district(s) [] |
| 10. <input type="checkbox"/> Concept of development or site improvements is shown on plan [] | 21. <input type="checkbox"/> Name(s) of existing adjacent road(s) [] |
| 11. <input type="checkbox"/> Quantity of specimen trees to be preserved is listed and shown on plan [] | 22. <input type="checkbox"/> Location of existing driveways or roadways on the opposite side of road(s) that abut the property [] |
| 12. <input type="checkbox"/> Quantity of specimen trees to be removed is | |

Authorized Registered Professional/Certified Arborist/Registered Forester 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. _____ By: _____

Development Plan Review-Planning & Development

2. _____

Design Professional Contacted By: _____ Date: _____ Time: _____

(To Be Contacted Only If Submittal Is Rejected)