

APPLICATION FOR CONDITIONAL APPROVAL OF PRELIMINARY PLAT

Jackson County Community Development Department
4487 Lafayette Street
(850) 482-9637 - Marianna, Florida 32446 - FAX (850) 482-9846

PROPERTY OWNER INFORMATION

Property Owner: (as written on deed) _____
Address: _____ City: _____
State: _____ Zip Code: _____ Contact Phone: _____
Property Owner: (if more than one) _____
Address: _____ City: _____
State: _____ Zip Code: _____ Contact Phone: _____

AGENT INFORMATION

Agent: (as identified by authorization letter) _____
Address: _____ City: _____
State: _____ Zip Code: _____ Contact Phone: _____

SUBDIVISION INFORMATION

Name of Subdivision: _____
Type of Subdivision: Minor Major Impact Private
Physical Location of Subdivision: _____
Area of Subdivision in Acres: _____ Number of Lots: _____
Proposed Lot Use: (residential, commercial, etc.) _____

TYPE OF WATER SUPPLY

Private Well
Public Water System

TYPE OF SEWAGE DISPOSAL

Individual Septic System
Public Sewage System

Name of provider if public water or sewage: _____

PHYSICAL FEATURES

Does the subdivision contain:
Water Frontage Wetlands Dry Caves
Ponds Areas Within 100-yr. Flood Zone

SUBMITTAL REQUIREMENTS

1. Fee

- 2. Copy of Recorded Deed
- 3. Plat (3 copies for Minor Subdivision, 6 copies for Major Subdivision)
- 4. Approvals from Environmental Health and/or Department of Environmental Protection

DEPARTMENT USE ONLY

CURRENT COMPREHENSIVE PLAN LAND USE DESIGNATION: _____

IS A COMP. PLAN CHANGE REQUIRED: YES NO
 CHANGE COMPLETED ___ \ ___ \ ___ (See Attached)

N.F.I.P NO: 12063CO- _____ ZONE: _____ FLOODWAY: YES NO

REQUIRED PLATS:
 Major Subdivision (6) SUBMITTED: YES NO
 Minor Subdivision (3) SUBMITTED: YES NO

APPLICATION FEE: Major Subdivision \$200.00 + \$20.00 Per Lot
 Minor Subdivision \$200.00

FFES PAID : YES ___ NO ___ AMOUNT PAID: _____ DATE: ___ \ ___ \ ___

TAKEN BY: _____ RECEIPT NUMBER: _____

PRELIMINARY PLAT:

PLANNING COMMISSION
 APPROVED _____ DENIED _____

COUNTY COMMISSION
 APPROVED _____ DENIED _____

STIPULATION _____

STIPULATION _____

FINAL PLAT:

PLANNING COMMISSION
 APPROVED _____ DENIED _____

COUNTY COMMISSION
 APPROVED _____ DENIED _____

STIPULATION _____

STIPULATION _____

DEVELOPMENT ORDER ISSUED: YES NO

DATE OF ISSUANCE: ___ \ ___ \ ___