



## Application for Subdivision Concept Plan Approval

City of Bremen  
232 Tallapoosa Street

Department of Community Development  
Bremen, GA 30110 (770) 537-2331

At the time of filing an application for preliminary plat approval, a fee shall be paid to the city. The preliminary plat fee shall be \$400.00 with an additional \$10.00 for each lot in said subdivision. A \$100.00 fee shall be imposed for any re-submittal and a fee of \$15.00 per lot shall be required. A fee of \$15.00 per lot shall be paid to the city for final plat approval, plus any legal and advertising fees the city may incur associated with the filing of the final plat

### Property Owner Information

Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

### Applicant Information

Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Telephone: \_\_\_\_\_ Cell: \_\_\_\_\_

### Property Information

Street Address or Location of Site: \_\_\_\_\_

Deed Book: \_\_\_\_\_ Map: \_\_\_\_\_ Parcel No: \_\_\_\_\_

Deed Book: \_\_\_\_\_ Map: \_\_\_\_\_ Parcel No: \_\_\_\_\_

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Total Acreage of Subdivision: \_\_\_\_\_

Acreage of Smallest Lot: \_\_\_\_\_ of Largest Lot: \_\_\_\_\_

Number of Lots: \_\_\_\_\_ Tax Code: \_\_\_\_\_

Zoning Classification: Current: \_\_\_\_\_ Proposed: \_\_\_\_\_

Type of Subdivision: \_\_\_\_\_

Proposed Name of Subdivision: \_\_\_\_\_

Proposed Widths of R/W: \_\_\_\_\_ and Streets: \_\_\_\_\_

Proposed Access and Egress from development: \_\_\_\_\_

Distance Apart: \_\_\_\_\_

**Uses of Adjacent Properties**

North: \_\_\_\_\_

East: \_\_\_\_\_

West: \_\_\_\_\_

South: \_\_\_\_\_

**Physical Information**

Natural Features: \_\_\_\_\_

\_\_\_\_\_

Floodplain(s) on Property: \_\_\_\_\_ if yes, approx. location(s):

\_\_\_\_\_

Wetland(s) on Property: \_\_\_\_\_ if yes, approx. location(s):

\_\_\_\_\_

**Availability of Utilities**

Water Availability: Yes \_\_\_\_\_ No \_\_\_\_\_ City or County: \_\_\_\_\_

Sewer Availability: Yes \_\_\_\_\_ No \_\_\_\_\_ City or County: \_\_\_\_\_

If no, proposed method of disposal: \_\_\_\_\_

\_\_\_\_\_

**Applicant Signature**

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Sign: \_\_\_\_\_

Fees: \_\_\_\_\_

All fees will be paid one week prior to the Planning and Zoning Board meeting that is held on the last Monday of each month.

Date of Planning and Zoning Board: \_\_\_\_\_