

# LEE COUNTY

# CITY OF LEESBURG

# CITY OF SMITHVILLE

# SUBDIVISION APPLICATION

Application #:	Date	e:
	Preliminary Approval	Minor Subdivision Approval
	Final Approval	General Development Plan Proposed
Subdivision Name: _		
		Agent:
Address:		Address:
Engineer or Land Sur	rveyor:	Agent:Total acreage:
relephone #. Landov	wher	Agent Total acreage
Zoning District:	Land Lot #	Land District:
Lee County Utilities	Authority Sanitary Sewer Syst	tem: (circle one) proposed or available YesNo
Private septic system	: (circle one) proposed or avai	lable Yes No
Lee County Utilities	Authority Central Water Syste	em: (circle one) proposed or available YesNo
Private Community V	Water System: (circle one) pro	posed or available YesNo
Private Well: (circle	one) proposed or available Ye	.sNo
Open Ditch		Curb & Gutter
REQUIRED ATTAC	CHMENTS: 1 completed subd	livision application and subdivision fee and:
Plat of Subc	livision (3 copies for minor, 2	5 copies for preliminary, 10 copies for final)
Legal Descr	ription (1 copy)	
In addition to the a	bove, for final subdivision ap	pplications, please submit:
and identifyi		street & water, sewer & storm drainage with locations and elevations AD 83 State Plane Coordinates, Zone, Georgia West, .dwg format
	le Improvements Guarantee (E or stormwater management ar	Bond or Letter of Credit) and; a Maintenance and Inspection eas;
DNR approv	al for proposed water or sewer	rage system, if required;
Deed transfer	rring title of all parks, jointly	y and easements to the Board of Commissioners owned public space and greenspace and other designated areas to the

01/03/2022

Complete page 2  I hereby certify that I am the landowner, or leg	gal agent of the landowner, in fee simple of the above-described property.
	Landowner/
Witness	ε
Date:	Date:
SUBDIVISION FEE (50% at Preliminary and	d 50% at Final)
# of lots(x) fee per lot	= \$
\$25 check to Clerk of Superior Court	per deed to be recorded.
SD Fee Amount: \$	Date Received:
Check #:	Received By:
STORMWATER MAINTENANCE AGREE Superior Court	EMENT: (\$25.00 at Preliminary) check made payable to the Clerk of
GS/MA Fee Amount: \$	Date Received:
Check #:	Received By: