

PRELIMINARY PLAT APPLICATION

\$250 plus \$50 per lot created over 5 lots

Confirm exact fee with staff- Cash/Check only – Make check payable to Oglethorpe County

Oglethorpe County Planning + Development – oglethorpeplanning.com P.O. Box 261 · Lexington, Georgia 30648 · 706-742-5270

Submit five (5) paper copies, completed applications and applicable review fees.

Plans should provide all information as required in the Oglethorpe County Subdivision Ordinance. Please note that you must submit plans separately to the Oglethorpe County Health Department for approval.

Following receipt of a complete submittal, the Preliminary Plat will be placed on the Zoning Board's agenda for review and the Board of Commissioner's agenda for approval.

Subdivision Name (Name on Plat):	Subdivision Section (if applicable):
Street Address and /or Street Name(s):	
Tax Map Number(s):	Total Acres: Parcel Zoning(s):
# of lots proposed: Is this an amendment to	an existing subdivision? Yes No
If yes, describe:	
Parcels will be served by [Check all appropriate box(s)]:	
Water: Public Water Private Well Community We	ell Sewer: Public Sewer Septic System
Property Owner(s):	
Address:	
Phone:	
Email:	
Professional Representative:	
Company:	
Address:	
Phone:	
Email:	
By signing, I hereby certify that I have read and examined the	his application and know the same to be true and correct.
Signature of Owner/Professional Representative:	Date:
FOR STAFF USE ONLY:	
Received by/Date:	
PP #: PP	