

Liberty Consolidated Planning Commission

100 Main Street, Suite 7520
Hinesville, Georgia 31313
Phone: 912-408-2030
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Jeff Ricketson, AICP

Executive Director

| | |
|--|-----------------------|
| GENERAL APPLICATION INFORMATION for ENGINEERING REVIEWS | LCPC Project # |
| Name of Project | |

PROPERTY OWNER

Name _____

Name of Contact (if owner is a corp. or other such entity) _____

Mailing Address _____

Phone _____ Email _____

AUTHORIZED AGENT FOR THE PROPERTY OWNER

Name _____

Name of Contact (if agent is a corp. or other such entity) _____

Mailing Address _____

Phone _____ Email _____

PROPERTY INFORMATION

Project Location Unincorporated Liberty County Hinesville Flemington Midway
 Allenhurst Riceboro Gumbranch _____

Street Address _____

Parcel Number _____ Size _____

APPLICATION REQUEST(S) - check all that apply

Site Plan Prelim. Plat Final Plat _____

| | | |
|------------------------|--|-----------------------|
| Name of Project | | LCPC Project # |
|------------------------|--|-----------------------|

| PROJECT DESCRIPTION | |
|---|---|
| Existing Use(s) of Property | <input type="checkbox"/> Undeveloped <input type="checkbox"/> _____ |
| Proposed Use(s) of Property | _____ |
| _____ | _____ |
| _____ | _____ |
| Work involves: <i>(check below all that apply)</i> | Detailed description of work <i>(incl. square footages, # lots, etc.)</i> |
| <input type="checkbox"/> New construction | _____ |
| <input type="checkbox"/> Demolition | _____ |
| <input type="checkbox"/> Addition | _____ |
| <input type="checkbox"/> Revision | _____ |
| <input type="checkbox"/> Subdivision or PUD | _____ |

| PREVIOUS ACTIONS OR APPROVALS FOR PROJECT | |
|--|--|
| <u>Date</u> | <u>Action/Approval</u> <i>(include any application or project #, if known)</i> |
| _____ | _____ |
| _____ | _____ |
| _____ | _____ |
| Prev. project name(s) _____ | |

| PROPERTY OWNER'S CERTIFICATION | |
|--|---------------|
| I, the undersigned, certify that I am either the property owner or the authorized principal of the owner. Further, I certify that the authorized agent named above has my permission to act on my behalf in all matters concerning this project. I understand that all contact for this application shall be made to and through the authorized agent. | |
| _____ Signature | _____ Date |

| OFFICE USE ONLY | |
|------------------------|-------------|
| Date of receipt _____ | Zoned _____ |
| _____ | |
| _____ | |
| _____ | |