



**City of Sugar Hill**  
**Planning & Development Department**  
**5039 West Broad Street**  
**Sugar Hill, Ga. 30518**  
**(770) 945-6734 Office (770) 945-2145 Fax**

**Project Information**  
**ROUTE SHEET ON BACK TO BE COMPLETED**

Project Name \_\_\_\_\_

Project Address \_\_\_\_\_

District \_\_\_\_\_ Land Lot \_\_\_\_\_ Parcel \_\_\_\_\_ Zoning \_\_\_\_\_

Total Number of Lots \_\_\_\_\_ Sewer or Septic \_\_\_\_\_ Site Acreage \_\_\_\_\_ Disturbed Acreage \_\_\_\_\_

Owner Name \_\_\_\_\_

Owner Address \_\_\_\_\_

Owner Phone \_\_\_\_\_ Owner Email \_\_\_\_\_

24 Hour Contact \_\_\_\_\_

24 Hour Contact Address \_\_\_\_\_

24 Hour Contact Phone \_\_\_\_\_ Contact Email \_\_\_\_\_

Developer \_\_\_\_\_ Designer \_\_\_\_\_

**EROSION CONTROL**

My signature hereon signifies that I am the person responsible for compliance with all applicable erosion control measures and requirements as required in the Soil Erosion and Sedimentation Control Ordinance and the State General Permit. I understand that the City of Sugar Hill staff may conduct inspections, issue Notices of Violation, Stop Work Orders, and summons' to appear before the Sugar Hill Municipal Court for uncorrected Violations of Erosion Control Requirements. I will install, maintain and monitor all Best Management Practices on a daily basis and follow all approved Erosion Control Plans, and perform all required testing and documentation to ensure that no erosion and sedimentation shall impact neighboring properties.

\_\_\_\_\_ / / \_\_\_\_\_ / / \_\_\_\_\_ / / \_\_\_\_\_ / /  
 Applicant Signature                      Date                      Owner Signature                      Date                      Contractor Signature                      Date

**Applicant's LDP Permit Checklist**

<u>DEVELOPMENT PERMIT</u>		<u>FINAL PLAT</u>
<input type="checkbox"/> Approved Flood Study	<input type="checkbox"/> Approved Hydrology Study	<input type="checkbox"/> Performance Bond
<input type="checkbox"/> DNR/EPD Receipt/Fees	<input type="checkbox"/> DOT Right of Way Plans	<input type="checkbox"/> Recorded Covenants
<input type="checkbox"/> NOI	<input type="checkbox"/> Erosion Control Bond	<input type="checkbox"/> CDC Package
<input type="checkbox"/> Natural Gas Installation Agreement	<input type="checkbox"/> Approved Lighting Plan	<input type="checkbox"/> Maintenance Bond
<input type="checkbox"/> Letter Notification to School	<input type="checkbox"/> Street Sign/Payment Approval	<input type="checkbox"/> As-built Hydrology/ Pond As-Built
<input type="checkbox"/> LIA Soil Erosion Approval	<input type="checkbox"/> LIA Soil Erosion Approval	<input type="checkbox"/> Maintenance Agreements (Storm water, Retaining Wall)
<input type="checkbox"/> Digital Copy (shp, dwg, or dxf)	<input type="checkbox"/> USPS Cluster Box Approval	<input type="checkbox"/> GDOT Notification of Local Road Activity

**For Office Use Only**

Submittal Date \_\_\_\_\_ Development Permit# \_\_\_\_\_

(Circle One) Type of review(s):

Concept Plan  
  Grubbing Plan  
  Clearing Plan  
  Grading Plan  
  Development/Site Plan  
  Preliminary Plat  
  Final Plat  
  Exemption Plat  
  Minor Review  
  Other Review

**FINAL APPROVAL**

<b>City of Sugar Hill Planning and Development Department</b> Director Approval		Applicable / Not Applicable
Signed: _____	Print Name: _____	Date _____
Conditions: _____		

<b>Reviewing Agency or Department - BY SIGNING BELOW, YOU HAVE APPROVED OF THE APPLICABLE PROPOSED PLANS AND AUTHORIZED THE CITY OF SUGAR HILL TO ISSUE APPROPRIATE PERMIT.</b>		<b>Applicable/NA (Circle One)</b>
<b>LIA Soil Erosion &amp; Sedimentation Control Ordinance Approval 770-945-6734 (City of Sugar Hill)</b>		Applicable / Not Applicable
Signed:	Print Name:	Date
Conditions:		
<b>Gwinnett County Department of Public Utilities 678-518-6153 (Existing or proposed water and /or sewer)</b>		Applicable / Not Applicable
Signed:	Print Name:	Date
<b>Water</b>		
Signed:	Print Name:	Date
<b>Sewer</b>		
Conditions:		
<b>Gwinnett County Fire Department 678-518-4980 (Fire Safety and ADA compliance)</b>		Applicable / Not Applicable
Signed:	Print Name:	Date
Conditions:		
<b>Gwinnett County Environmental Health Department 770-963-5132 (Septic Tanks and/or associated structures)</b>		Applicable / Not Applicable
Signed:	Print Name:	Date
Conditions:		
<b>Gwinnett County Department of Transportation (Construction in right of way) COUNTY RIGHT OF WAY 678-518-6178 STATE RIGHT OF WAY 770-339-2308</b>		Applicable / Not Applicable <b>COUNTY / STATE</b>
Signed:	Print Name:	Date
Conditions:		
<b>Gwinnett County Development Review 678-518-6017 / Tax Assessor 770-822-7219 (Assign subdivision name, street names and addresses)</b>		Applicable / Not Applicable
Signed:	Print Name:	Date
<b>Development Review</b>		
Conditions:		
Signed:	Print Name:	Date
<b>Tax Accessors:</b>		
Conditions:		
<b>City of Sugar Hill Street Department/Payment of Street Signs 770-271-2137</b>		Applicable / Not Applicable
Signed:	Print Name:	Date
Conditions:		
<b>City of Sugar Hill Gas Department 770-271-2137</b>		Applicable / Not Applicable
Signed:	Print Name:	Date
Conditions:		
<b>Electrical Provider Lighting Plan Approval GA Power – William Canady 404-285-3423 SAWNEE Electric- Glennis Buice 770-887-2363 X 7344 wcanady@southernco.com</b>		Applicable / Not Applicable GA POWER / SAWNEE ELECT
Signed:	Print Name:	Date
Conditions:		
<b>United States Postal Service 678-482-8421 – Cluster Box Units – Vicky Reed</b>		Applicable / Not Applicable
Signed:	Print Name:	Date
Conditions:		