



**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"/> Performance Bond                                     |
| <input type="checkbox"/> DNR/EPD Receipt/Fees               | <input type="checkbox"/> Recorded Covenants                                   |
| <input type="checkbox"/> NOI                                | <input type="checkbox"/> CDC Package  |
| <input type="checkbox"/> Natural Gas Installation Agreement | <input type="checkbox"/> Maintenance Bond                                     |
| <input type="checkbox"/> Letter Notification to School      | <input type="checkbox"/> As-Built Hydrology/ Pond As-Built                    |
| <input type="checkbox"/> LIA Soil Erosion Approval          | <input type="checkbox"/> Maintenance Agreements (Storm Water, Retaining Wall) |
| <input type="checkbox"/> Digital Copy (PDF)                 | <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**

City of Sugar Hill Planning and Development Department 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>City of Sugar Hill Soil Erosion and Sedimentation Control Approval 770-945-6734</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>Department of Transportation (Construction in right-of -way) STATE RIGHT OF WAY 770-339-2308</b>		Applicable / Not Applicable
Signed:	Print Name:	Date
Conditions:		
<b>City Street Dept./Payment of Street Signs Joe Appling, Public Works Superintendent 770-271-2137</b>		Applicable / Not Applicable
Signed:	Print Name:	Date
Conditions:		
<b>City of Sugar Hill Gas Department Matt Allen, Gas Department Supervisor 770-271-2137</b>		Applicable / Not Applicable
Signed:	Print Name:	Date
Conditions:		
<b>Electrical Provider Lighting Plan Approval - Sign or provide email approval GA Power – Willian Canady 770-740-7660      SAWNEE Electric- Glennis Buice 770-887-2363 X 7344 whcanady@southernco.com</b>		Applicable / Not Applicable GA POWER / SAWNEE ELECT
Signed:	Print Name:	Date
Conditions:		
<b>United States Postal Service 678-442-6026 – USPS Address Management – Sign or provide email approval</b>		Applicable / Not Applicable
Signed:	Print Name:	Date
Conditions:		
<b>Gwinnett County Approvals</b> <b>For Gwinnett County Approvals, provide emails from each entity indicating approval and digital copy of stamped approved plans</b>		
• <b>Water Review 678-518-6153</b>	• <b>Sewer Review 678-518-6153</b>	• <b>Plan Review 678-518-6017</b>
• <b>Gwinnett DOT 678-518-6178</b>	• <b>Tax Assessor 770-822-7219</b>	• <b>Addressing 678-518-6017</b>
• <b>Fire Plan Review 678-518-4980</b>		