



310 Technology Parkway
Peachtree Corners, GA 30092
Tel: 678.691.1200 | www.peachtreecornersga.gov

Staff Use: Date: ____/____/____ Permit No.: _____ Fee: \$ _____

River Corridor Application

Date: _____
Development Name: _____
Project Address: _____

Total Site Acreage: _____
Proposed Disturbed SF: _____
Existing Impervious SF: _____
Proposed Impervious SF: _____
Sewer or Septic: _____

Building SF/#Lots or Units: _____
Subdivision/Phase/Lot #: _____
Existing MRPA Certificate #, if applicable: _____
Description of Proposed Project: _____

Plan Submittal Type	Fee
City MRPA Review	\$500
ARC MRPA Review	\$780

Applicant Information: Check if recipient would like a copy of all comments sent

Name: _____
Email: _____ Phone: _____
Company: _____
Address: _____

Engineer Information: Check if recipient would like a copy of all comments sent

Name: _____
Email: _____ Phone: _____
Company: _____
Address: _____

Owner Information: Check if recipient would like a copy of all comments sent

Name: _____
Email: _____ Phone: _____
Address: _____

I hereby certify that all information provided herein is true and correct

Property Owner/Owner's Representative Signature: _____ Date: _____