



LAND DISTURBANCE PERMIT- ROUTE SHEET

Date submitted: _____
Project Name: _____
Project Address: _____
Project Type: _____ Zoning: _____
Land Lot, District and Parcel Information: _____ No of Lots: _____
Total Site Acreage: _____ Disturbed Acreage: _____
Primary Contact Information: _____ Email: _____
Phone: _____ Signature: _____
Property Owner's Name: _____ Property Owner Signature: _____
Property Owner's Address: _____
Designer's Name: _____ Email: _____
Fees Paid: _____ PTC Submittal # _____
Received By: _____

GWINNETT COUNTY REQUIRED APPROVALS

Gwinnett Public Utilities Water and Sewer Division (678-518-6150) Authorized By: _____

Conditions: _____ Date: _____

Fire Services (770-822-7690): Authorized By: _____

Conditions: _____ Date: _____

Department of Transportation (770-822-7400): Approved By: _____

(If work will be done on a County Road)

Conditions: _____ Date: _____

Development Services (770-822-7533): Authorized By: _____

(Addresses)

Conditions: _____ Date: _____

Environmental Health (770-963-5132): Authorized By: _____

(Septic and Restaurants)

Conditions: _____ Date: _____

County Tax Commissioner (770-822-8800): Ad Valorem Taxes Paid: _____

CITY OF PEACHTREE CORNERS REQUIRED APPROVALS

Zoning Review (770-691-1205): Authorized By: _____

Engineering Plan Review (470-395-7022): Authorized By: _____

STATE OF GEORGIA REQUIRED APPROVALS

Department of Transportation (770-339-2308/2310): Authorized By: _____

Soil & Water Conservation Commission (770-761-3020): Authorized By: _____

Atlanta Regional Commission (MRPA) (404-463-3100): Authorized By: _____