



310 Technology Parkway  
Peachtree Corners, GA 30092  
Tel: 678.691.1200 | [www.peachtreecornersga.gov](http://www.peachtreecornersga.gov)

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

## Land Disturbance Permit REVISION Application

Date: \_\_\_\_\_  
 Development Name: \_\_\_\_\_  
 Project Address: \_\_\_\_\_  
 Zoning & Case #: \_\_\_\_\_  
 Building SF/#Lots or Units: \_\_\_\_\_  
 Description of Proposed Revision: \_\_\_\_\_

Total Site Acreage: \_\_\_\_\_  
 Proposed Disturbed Acreage: \_\_\_\_\_  
 Existing Impervious Acreage: \_\_\_\_\_  
 Proposed Impervious Acreage: \_\_\_\_\_

Check all the following that apply:

- New Single-Family Development
- New Multi-Family Development
- New Commercial Development
- Redevelopment

- Stream Buffers/Floodplain/Wetlands
- Land Disturbance > 5,000 sq. ft.
- Within River Corridor
- Other: \_\_\_\_\_

Possible Additional Permits:

- Demolition
- Retaining Wall (over 4')
- Other: \_\_\_\_\_

Development Plan Submittal Types	Revision Fee	Fee Paid
Minor LDP Plan Revision	\$100	
Major LDP Plan Revision	\$250	

**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: \_\_\_\_\_