

# ST. CHARLES PARISH

#### DEPARTMENT OF PLANNING & ZONING

# APPLICATION FOR APPROVAL SUBDIVISION OR RESUBDIVISION

### **PZS - WEB**

PZS CASE #:RECEIPT #:		DATE SUBMITTED:				
		ZONING DISTRICT:				
I. APPLICANT IN	NT INFORMATION:					
		PRPORATION, GIVE THE NAME AND TITLE OF RESPONSIBLE OFFICIFICATION OF PARTNERSHIP MUST BE ATTACHED TO THE				
PROPERTY OWNER(S): _						
				PHONE:		
SUBDIVISION ENGINEER	R OR LAND SURVEYOR:					
DATE OF SURVEY:						
II. PROPERTY DE	ESCRIPTION:					
SUBDIVISION NAME:						
<b>INCLUDING A COPY OF</b>		<u>IUST</u> BE ATTA ORDED IN TH	CHED TO THIS			
HAVE ALL CURRENT TA				IF NO, PLEASE STATE		
FLOODPLAIN DESIGNAT						
	RECORDED IN MOB					
HELD BY						

IF THERE ARE <u>ANY</u> OTHER LIENS OR ENCUMBRANCES AGAINST THE LAND YOU <u>MUST</u> SPECIFY:						
CHECKLIS	T OF APPLICATION REQUIREMENTS:					
1.	Complete application. If property owner is a corporate entity, the application must be signed by an authorized corporate representative and must be accompanied by a corporate resolution.					
2.	Complete abutting property owner form (information <u>MUST</u> be obtained from Assessor's Office).					
3.	Plat plan (Mylar and five copies), <u>which conforms to all requirements</u> for Preliminary Plats or Minor Subdivision Plats (whichever is applicable).					
4.	Drainage Impact Analysis for any application affecting land areas of one acre or greater.					
5.	Metes and bounds description of the entire holding, deed restrictions, easements, and servitudes including a copy of the deed or deeds thereto. (Deeds may be obtained at Clerk of Court's Office)					
6.	Paid subdivision application fee (checks/money orders made payable to the St. Charles Parish/Dept. of Finance).					
	PLANNER CERTIFICATION OF APPLICATION:					
	(Signature)					
** ALL CO	MMUNICATIONS WITH REGARD TO THIS SUBDIVISION OR RESUBDIVISION SHALL BE					
ADDRESSE	D TO THE FOLLOWING PERSON UNTIL FURTHER NOTICE:					
NAME:						
ADDRESS:						
CONTACT '	ΓELEPHONE NUMBER:					

#### **ABUTTING PROPERTY OWNERS**

List names and addresses of **each owner** of property abutting the subject application parcel:

	Name of Property Owner(s)	ADDRESS OF PROPERTY OWNER(S)
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14.		

If there are more than twelve abutting property owners list their names and addresses on an additional sheet(s) of paper and attach.

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(SEAL)