



Application for
Final Plat Review

City of Senolia
P.O. Box 310
Senolia, GA 30276
770.599.3679

Project Name: _____ **Phase:** _____

Zoning District: _____ **Acreage:** _____ **Historic District:** YES / NO

Owner(s) Name: _____

Applicant(s) Name: _____

Property Location: _____
Property Address land lot(s), parcel(s)

Mailing Address: _____

Phone Number: _____ **Fax number:** _____

Proposed Use of Land: _____

Number of Lots: _____

Fee: \$200 + \$20 X number of lots (_____) = _____
Fee is due at application.

Signature: _____ **Date:** _____

For office use only

Date: Rec'd by:

1. Final Plat meets specs from 40-73, 40-74
2. 8 copies of the Final Plat & 2 Mylar Copies
 - a. Copy to City Administrator: _____
 - b. Copy to City Engineer: _____
 - c. Copy to City Planner: _____

3. 1 PDF of the Final Plat
4. 1 DWG of the Final Plat