



**Site Plan Review  
Application**

**City of Senoia  
P.O. Box 310  
Senoia, GA 30276  
770.599.3679**

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Project Name: \_\_\_\_\_ Unit: \_\_\_\_\_ Phase: \_\_\_\_\_

Zoning District: \_\_\_\_\_ Acreage: \_\_\_\_\_ Number of Units: \_\_\_\_\_

Owner(s) Name: \_\_\_\_\_

Applicant(s) Name: \_\_\_\_\_

Property Location: \_\_\_\_\_  
Property Address Land Lot(s), Parcel(s)

Mailing Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Fax: \_\_\_\_\_

Email address (if available): \_\_\_\_\_

Description of Project: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Applicant Checklist:

1. \_\_\_\_\_ Required fee - \$300 + \$20 per acre/lot
2. \_\_\_\_\_ 12 copies of the Site Plan and 1 PDF

Owner's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Owner's Name: \_\_\_\_\_

Applicant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Applicant's Name: \_\_\_\_\_

1. Date Sent to Engineer \_\_\_\_\_
2. Date Sent to Planner \_\_\_\_\_
3. Date of Planning Commission Meeting \_\_\_\_\_
4. Expected Date of Ruling by Planning Commission \_\_\_\_\_