



CIVIL PLAN REVIEW APPLICATION FORM GAINESVILLE

Community Development Department
311 Henry Ward Way
Gainesville, Georgia 30503
Phone 770-531-6570 Fax 770-297-7826

Application Date:		Parcel Number:	
Jurisdiction:	Zoning:	Project Type:	
Site Address:			
Project Name:			
Proposed Use:			
Vicinity:			
Owner:		Total project Area:	
Engineer:		Number of Lots:	
Contact Person:		Within 200' of State Water:	
Water System: Public Water: <input type="checkbox"/> Yes <input type="checkbox"/> No Individual Well: <input type="checkbox"/> Yes <input type="checkbox"/> No Private System: <input type="checkbox"/> Yes <input type="checkbox"/> No		Sewer System: Public Sewer: <input type="checkbox"/> Yes <input type="checkbox"/> No Septic: <input type="checkbox"/> Yes <input type="checkbox"/> No Private System: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Applicant Signature:			
Signed _____		Print Name _____	
Company _____		e-mail address _____	