JACLYN HOTARD Parish President



SUBDIVISION APPLICATION

TO SUBMIT APPLICATION ONLINE VISIT WWW.MYGOVERNMENTONLINE.ORG

OFFICE USE ONLY

Docket No:			Date Requested:		
Meeting Date:			Zoning District:		
			Flood Zone:		
Council District /	At Large:		Historic District: Y / N	Design Rev Corridor: Y / N	
Lot, Sq., Subdivis	ion:				
APPLICANT INFO	RMATION				
Mailing Address:					
Phone:		Email:			
PROPERTY OWN	ER INFORMATION (ALL owner	s must be listed and n	nust sign)		
Same as above? (ci	rcle one) YES / NO If NO, ha verified v		ne applicant to act on behalf o l, and notarized endorsement		
Name:					
Mailing Address:					
Phone:		Email:			
SUBDIVISION INF	ORMATION				
Subdivision Name:					
	Preliminary Plat		Resubdivision of I	Existing	
	Conditional Plat		□ Administrative Re	esubdivision	
	Final Plat		Family Resubdivis	sion	
Total Acreage:		Total :	Square Footage:		
Current # of lots: _		Propo	osed # of lots:		
Property Address:			Zoning D	vistrict:	
Applicant's Signat	ure		Date		
		e, LA 70068 Ph	one: 985-651-5565 www	.sjbparish.gov	



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SUBDIVISION INFORMATION (continued):

List bounding streets, railroads, canals, or landmarks immediately abutting the property:

Has the subdivision	ever been l	before the	Planning	Commission?	(circle)	YES /	/ NO
			i iuiiiiig	commission.		,	

If YES, when? _____ Describe application/approval: _____

Describe changes made to the plat/property since this approval:

Is a modification from the Subdivision Regulations being requested? (circle) YES / NO

If YES, please describe:

Current use of property: _____

Proposed use of property: _____

SUBMITTAL REQUIREMENTS

 \Box Completed and signed application.

□ Recorded copy of Act of Sale, Judgement of Possession, or Deed to the property.

 \Box Five (5) stamped copies of the proposed subdivision/resubdivision plat.

□ Payment of fees; payable by credit card, check or money order to: "St. John Parish Council".

NOTE: St. John the Baptist Parish has not examined nor reviewed the title of any portion of land in this application, or any restrictive covenants or restrictions placed on said property. Any action of the Parish in this matter does not: (1) imply that the applicant's title or ownership is valid, (2) that there are or are not any restrictive covenants or other restrictions on said property, or (3) that any restrictive covenants or restrictions that may be on said property are enforceable or are not enforceable.

NOTE: Within sixty (60) days of submission of minimum application requirements, this application will become null and void. By signature of this application, the applicant agrees and understand that all permit fees are non-refundable.

NOTE: This request MUST be approved by Council.

Applicant's Signature

Date



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OWNER'S AFFIDAVIT OF UNDERSTANDING

I (We), do hereby understand that this plat and the development of this area shall comply with all the requirements of the State of Louisiana pertaining to the zoning, subdivision and development of land within St. John the Baptist Parish, State of Louisiana, and that this plat shall not be accepted for review until all required items have been submitted in the proper manner, to the Parish Council, or its duly authorized representative, and all required fees have been paid and received by the Parish Council or its duly appointed representative. I (We) further understand that St. John the Baptist Parish has not examined nor reviewed the title of any portion of land shown, nor any restrictive covenants or restrictions placed thereon. I (We) understand that any action to affirm this subdivision request does not imply: (1) that the applicants' title or ownership is valid, (2) that there are or are not any restrictive covenants on the property, or (3) that any restrictive covenants or restrictions that may be on the property are enforceable or are not enforceable.

Owner's Signature	Date	Owner's Signature	Date	
SWORN TO ME THIS	DAY OF	·	_	
NOTARY PUBLIC				
Print name of Notary:				
Bar roll #:				

JACLYN HOTARD Parish President



RESIDENTIAL PERMIT APPLICATION

OFFICE USE ONLY

Permit No: _____

PROCESSING FEES (to be completed by office personnel)				
Advertisement\$ 50.00	Advertisement\$ 50.00			
Preliminary Plat\$200.00	Preliminary Plat\$225.00			
Lot #x \$5\$	Recording Fee TBD			
Technology Fee\$ 10.00	GIS Update\$ 50.00			
TOTAL\$	Technology Fee\$ 10.00			
	TOTAL\$			
Conditional Plat\$200.00	Advertisement\$ 50.00			
Lot #x \$20\$	1st two (2) lots\$ 50.00			
Inspection Fee\$	Remaining Lot # after 2x \$10 =			
(\$1.50 / linear feet of street)	\$			
Technology Fee\$ 10.00	GIS Update\$ 50.00			
TOTAL\$\$	Technology Fee\$ 10.00			
	TOTAL\$			

Applicant's Signature

Date

JACLYN HOTARD Parish President

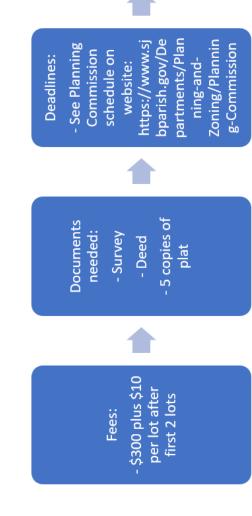


SUBDIVISION APPLICATION

	OFFICE USE ONLY		
Permit No:			
<u>ov</u>	NNER'S ENDORSEMENT		
	(please print clearly)		
being duly sworn, depose that I reside at			
Owner(s) / Corporation			
Street		City	in the Parish
		·	
of Parish	and State of	State	and that I am
the owner of the property described as		and that I have	authorized
the owner of the property described as	Address		
	to make the foregoir	ng subdivision/resub	division application.
Applicant			
Signature of owner(s) of property or authorized agent			
SWORN TO ME THISDAY OF	//		
NOTARY PUBLIC			
Print name of Notary:			
Finit name of Notary.			

Bar roll #: ______

Resubdivision Process



lf approved by both PC and Council, contact Planning & Zoning for further instructions

If approved: - Introduced at next Council Meeting - Voted on at 2nd Council Meeting

Attend Planning Commission - If tabled: 45 days to act (next PC) - If denied: resolution created affirming denial for next Council meeting