

SUBDIVISION APPLICATION

TO SUBMIT APPLICATION ONLINE VISIT WWW.MYGOVERNMENTONLINE.ORG

OFFICE USE ONLY

Docket No:			Date Requested:		
Meeting Date:			Zoning District: Flood Zone:		
Parcel #:					
Council District /	At Large:		Historic District: Y / N	Design Rev Corridor: Y / N	
Lot, Sq., Subdivis	ion:				
APPLICANT INFO	<u>RMATION</u>				
Name:					
Mailing Address:					
Phone:		Email:			
PROPERTY OWN	ER INFORMATION (ALL owne	rs must be listed and n	nust sign)		
Same as above? (ci	,	•	ne applicant to act on behalf o I, and notarized endorsement		
Name:					
Mailing Address:					
Phone:		Email:			
SUBDIVISION INF	ORMATION				
Subdivision Name:					
	Preliminary Plat		□ Resubdivision of	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	istrict:	
Applicant's Signat	ure		Date		
	1811 W. Airline Hwy., LaPlac	ce, LA 70068 Ph	one: 985-651-5565 www	.sjbparish.gov 1	



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SUBDIVISION INFORMATION (continued):

Has the subdivision ever been before	the Planning Commission? (circle) YES / NO
If YES , when?	Describe application/approval:
Describe changes made to the plat/pr	operty 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.

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 #:			



RESIDENTIAL PERMIT APPLICATION

OFFICE USE ONLY

Docket 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\$	GIS Update\$ 50.00			
Technology Fee\$ 10.00	Recordation Fee TBD			
TOTAL\$	Technology Fee\$ 10.00			
	TOTAL\$			
Conditional Plat\$200.00	Advertisement\$ 50.00			
Lot #x \$20\$	1st two (2) lots\$ 50.00			
Inspection Fee\$ (\$1.50 / linear feet of street) Technology Fee\$ 10.00	Remaining Lot # after 2x \$10 =			
	\$			
	GIS Update\$ 50.00			
TOTAL\$	Recordation Fee TBD			
	Technology Fee\$ 10.00			
	TOTAL\$			

Applicant's Signature

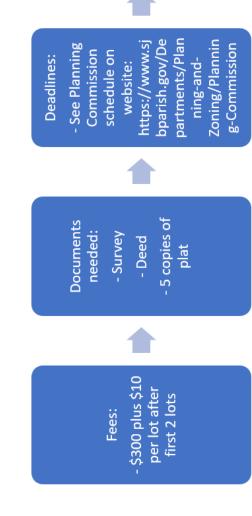
Date



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	OFFICE USE ONLY	
Docket No:		
<u>OV</u>	VNER'S ENDORSEMENT	
	(please print clearly)	
	being duly sworn, depose that I reside at	
Owner(s) / Corporation		
Street	,City	_ in the Parish
of	and State of	_ and that I am
Parish	State	_
the owner of the property described as	and that I have author Address	orized
	to make the foregoing subdivision/resubdivisi	on application.
Applicant		
Signature of owner(s) of property or authorized agent		
SWORN TO ME THISDAY OF	,	
NOTARY PUBLIC		
Print 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



PROCESS TIMELINE ACKNOWLEDGEMENT

OFFICE USE ONLY

Docket No:	Project/Permit Type:	
Applicant:		
Best Contact Number:	Email:	
Meeting: Historic District ZBA	Planning Commission	Council
Application received:		
P&Z Meeting Date:		
Council Meeting Date:(if applicable)		
I understand and acknowledge the meeting date list present at the P&Z meeting.	ed above and agree to appear or have	e a representative
□ I understand and acknowledge failure to attend will	result in the request being tabled and	will delay this process.
I understand and acknowledge that the Planning Co final approval or denial is determined by the Parish	· · · · · · · · · · · · · · · · · · ·	to the Council. Therefore,
I understand and acknowledge that all fees are non-	refundable.	
Applicant's Signature	Date	

Rec'd By: ______ on _____