

## ROW/DRIVEWAY PERMIT APPLICATION

Date:		
Address of Request:		
Tax Map # Current Zoning:		
Is this site located within the boundaries of the historic district?		
Currently a conforming use?		
Any conditions of zoning, CUP's, etc.?		
Check One: ROW Encroachment Oriveway Permit		
PROJECT TYPE: COMMERCIAL MULTIFAMILY SUBDIVISION GOV'T/INSTITUTION PROJECT ACRES:PROPOSED DATE OF CONSTRUCTION:		
Description of Work		
Applicant Information		

Name:	
Address:	
E-mail:	Phone number:
Signature:	



Property owner information (if different than the applicant)

Property owner (please print): \_\_\_\_\_

Signature of property owner: \_\_\_\_\_

## GENERAL REQUIREMENTS:

- Applicant is responsible for submitting all applicable plans, reports, and/or drawings.
- Applicant is responsible for obtaining any additional permits required by the Georgia Department of Transportation, Georgia Environmental Protection Division, and/or other government agencies.
- Applicant must maintain access to all sidewalks and driveways.
- Applicant must submit a Street/Lane Closure Permit Application to the City of Flowery Branch a minimum of five (5) working days prior to closing any street or lane.
- Applicant must comply with work zone safety standards set forth in the current Manual on Uniform Traffic Control Devices (MUTCD) while performing work within public rights-of-way.
- Applicant must comply with Chapter 33 "Safeguards During Construction" of the most current edition of the International Building Code.
- Applicant must protect utilities, storm drains, streets, and other infrastructure from damage and shall be responsible for any repairs required as a result of any actions, omissions, or negligence.
- Applicant indemnifies and holds harmless the City of Flowery Branch and its officers, agents, and employees from all liability, loss cost, and expenses, including attorney's fees, that may result from the applicant's failure to take all necessary precautions for preventing accidents, injuries and/or damage to property.

THIS APPLICATION IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND THE PROPOSED WORK WILL MEET ALL CODES AND ORDINANCES OF THE CITY OF FLOWERY BRANCH.

APPLICANT'S SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_



## CITY STAFF ONLY

Permit Issued By:
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Date: \_\_\_\_\_ Total Fee: \_\_\_\_\_