



6703 Sullivan Road, Central, LA 70739  
P: 225.262.5000 ~ F: 225.262.5001

### A-13 Application Major Street Set Back Reduction

Application Fee \_\_\_\_\_

File Number \_\_\_\_\_

Receipt Number \_\_\_\_\_

Meeting Date \_\_\_\_\_

Application taken by \_\_\_\_\_

**Please Print or Type**

1. Name of applicant \_\_\_\_\_ Daytime Telephone \_\_\_\_\_

E-Mail Address \_\_\_\_\_

Business (if applicable) \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

2. Name of property owner \_\_\_\_\_ Daytime Telephone \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

3. Legal description of property (Subdivision or Tract name) \_\_\_\_\_

Lot \_\_\_\_\_ Block / Square \_\_\_\_\_

Subdivision \_\_\_\_\_

*If property is not subdivided, attach a complete legal description from the East Baton Rouge Parish Tax Assessor and a survey map indication bearings and dimensions.*

Location \_\_\_\_\_

*Identify the subject property on an appropriate vicinity map as an attachment to this application.*

4. Property street address \_\_\_\_\_

5. Specific proposed use

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

6. Action Requested

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7. Justification for action requested

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8. Provide a Plot Plan of property showing the area of proposed set back reduction.

9. Acknowledgement

In filing this application, I understand that it becomes a part of the public record of the City of Central/Parish of East Baton Rouge and hereby certify that all information contained herein is accurate to the best of my knowledge. **Also, I understand that the application fee is nonrefundable. (Applications must be received by noon on the scheduled Application Deadline.)**

Application must be signed by both applicant and property owner if different. Letter of authorization must be submitted in absence of the property owner's signature or where an authorized agent signs in lieu of either property owner or applicant.

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Signature of Applicant	Type or Print Name of Applicant	Date
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Signature of Property Owner	Type or Print Name of Property Owner	Date
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**Staff Use Only**

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- A. Land use classification (s) \_\_\_\_\_
- B. Zoning classification (s) \_\_\_\_\_
- C. Existing land use (s) \_\_\_\_\_
- D. Surrounding land use (s) \_\_\_\_\_
- E. Surrounding land use classification (s) \_\_\_\_\_
- F. Surrounding zoning classification (s) \_\_\_\_\_
- G. Action Requested \_\_\_\_\_  
    Required Set Back \_\_\_\_\_  
    Requested Set Back \_\_\_\_\_
- H. Letter (s) of no objection       Department of Public Works – Traffic Engineering  
   Department of Public Works – Landscape & Forestry  
  (If necessary)  
   Attorney's Office
- I. Comments  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
- J. Is Subject property located on **Green Light Plan** if so, contact as needed.  
     No  
     Yes - *date correspondence sent* \_\_\_\_\_.
- K. \_\_\_\_\_  
    Planning Director or Authorized Signature Date

**Instructions for Application A-16  
Major Street Set Back Reduction**

<i>Number</i>	<i>Item</i>	<i>Explanation</i>
1.	Name of Applicant	Your name, a person's name, the name of the person who will sign as applicant in item 9 (i.e. John Doe, Mary Jones).
	Daytime Telephone	Telephone number where you may be reached Monday through Friday between 8:00 a.m. and 5:00 p.m.
	Business (if applicable)	If you are submitting this application as a representative of a business, put the name of the business here. If you are not submitting this application as a representative of a business, leave blank.
	Address/City/State/Zip	Your current mailing address.
2.	Name of the property owner	The name of the person who currently owns the property described in item number 3. If the property is owned in the name of a business, the name of person employed by the business authorized to act as property owner. The name of the person who will sign as property owner in item number 9. (i.e. John Doe, Mary Jones).
	Daytime Telephone	Telephone number where the property owner may be reached Monday through Friday between 8:00 a.m. and 5:00 p.m.
	Address/City/State/Zip	Property owner's current mailing address.
3.	Legal description of property	Lot, block, square, subdivision, and tax parcel number as listed in the current tax roll of the property. Location must be shown on a lot and block map attached to the application.
4.	Property Street Address	Indicate the municipal address of the property if applicable. (i.e. municipal number and street name)
5.	Specific proposed use	Indicate the specific land use proposed for this property if any.
6.	Action Requested	Indicate that the action requested by the Planning Commission will be for a reduction of a specified distance. Major Street Setback distances are determined by one

half of the required right-of-way plus the required yard for the zoning of the property.

7. Justification for Action Request State the reason for requesting the Major Street Setback Reduction.
8. Plot Plan of Property Provide a plot plan of subject property showing the area of the proposed setback reduction, including building(s), driveway(s), parking area(s), street(s), entrance(s) and exit(s) if determined to be necessary by the planning staff. Please attach plot plan to the application form.
9. Acknowledgement The applicant shall sign and date the application. The owner shall sign and date the application if different from the applicant.