



6703 Sullivan Road, Central, LA 70739
P: 225.262-5000 ~ F: 225.262.5001

A-4 Application Site Plan

Application Fee _____

File Number _____

Receipt Number _____

Meeting Date _____

Application taken by _____

(if applicable)

Review Staff Planning Commission

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 _____

E-Mail Address _____

Address _____ City _____ State _____ Zip _____

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

Lot _____ 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 the appropriate lot and block map as an attachment to this application.

4. Specific proposed use (type of development and general background)

5. Waiver (s) requested No Yes

If "Yes", please specify the ordinance section, paragraph, and give justification for the requested waiver (s).

6. Traffic Impact Statement Submitted Not Submitted (If not submitted please explain)

7. Stormwater Management Plan (SMP)

A. Drainage Impact Study Submitted Not Submitted (If not submitted please explain)

B. Water Quality Impact Study Submitted Not Submitted (If not submitted please explain)

8. Parking Indicate formula used to calculate parking spaces for standard (Std.) and Handicap (HC).

Use Bldg./Phase	Parking Required Ratio	Existing		Proposed		Total	
		Std	HC	Std	HC	Std	HC
a. _____	_____	____ ____	____ ____	____ ____	____ ____	____ ____	_____
b. _____	_____	____ ____	____ ____	____ ____	____ ____	____ ____	_____
c. _____	_____	____ ____	____ ____	____ ____	____ ____	____ ____	_____

9. Building (s)

	Existing Square Feet	Proposed Square Feet	Total
Building _____	_____	_____	_____
Building _____	_____	_____	_____
Total _____	_____	_____	_____

10. Units per building

	One Bedroom	Two Bedrooms	Three Bedrooms	Other	Total Units
Building _____	_____	_____	_____	_____	_____
Building _____	_____	_____	_____	_____	_____
Total _____	_____	_____	_____	_____	_____

11. Fault Line

Describe all fault lines or other geologic hazards that affect this property and identify these features on the proposed site plan. (Use additional sheet if necessary)

12. 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 of 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.

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

-
- 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. Proposed land use _____
- H. Masterplan land use Consistent Not Consistent
- I. Traffic Impact Statement Yes No If "No" explain _____
- J. Stormwater Management Plan (SMP)
- a. Drainage Impact Study (DIS) Yes No If "No" explain _____
- b. Water Quality Impact Study (WQIS) Yes No If "No" explain _____
- K. Waiver (s) requested Yes No
- L. Complete check list Yes No
- M. Comments
- _____
- _____
- _____
- N. Environmental Land Use Controls on property?
- No
- Yes – Send ELUCs notification letter to land owner and copy to applicant (if applicant is not land owner)
- O. Is subject property within Zone of Influence (Baker, Zachary, Baton Rouge, BRCC) if so contact as needed.
- No
- Yes - *date correspondence sent* _____.
- P. Is Subject property located on **Green Light Plan** if so, contact as needed.
- No
- Yes - *date correspondence sent* _____.
- Q. _____
- Planning Director or Authorized Signature Date

**Instructions for Application A-4
Site Plans**

<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 10 (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 10. (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.
4.	Specific proposed use	Indicate the type of development and general background of the site plan proposal. Specific proposed use of the property or structure(s) (i.e. Single Family Residential, shopping center, etc).
5.	Waiver (s) requested	Indicate whether a waiver is being requested for the proposed project. Specify

ordinance section, paragraph and reason(s) for requesting the waiver (s).

6. Traffic Impact Statement Indicate whether a Traffic Impact Study has been completed by the Department of Public Works.
7. Stormwater Management Plan (SMP)
 - a. Drainage Impact Study (DIS) Indicate whether a DIS has been submitted or not submitted with the Site Plan package.
 - b. Water Quality Impact Study (WQIS) Indicate whether a WQIS has been submitted or not submitted with the Site Plan package.
8. Parking Indicate the ratio used to calculate parking spaces for standard and handicap for the proposed Site Plan. Indicate the number of existing, required, proposed, etc. spaces for each phase of the development as required by the Unified Development Code
9. Buildings Indicate the number of buildings proposed as well as the existing proposed and total square feet for each building.
10. Units Per Building Indicate the number of apartment buildings and the number of one, two, three or other bedroom apartments planned for this proposal.
11. Fault line identification Describe all fault lines or other geologic hazards that affect this property and identify these features on the proposed site plan.
12. Acknowledgement The applicant shall sign and date the application. The owner shall sign and date the application if the owner is different from the applicant. 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.