## **CITY OF SNELLVILLE**

www.snellville.org

## $\frac{PLANNING \& DEVELOPMENT REVIEW COMMENTS}{RESIDENTIAL CONCEPT PLAN}$

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Project Name						
Review Date						
	<u>PLEASE ADI</u>	RESS ALL MARKED ITEMS AND ANY APPLICABLE UNMARKED ITE	MS			
•••	Please resi	tact reviewer bmit plans can be walked through  X=please address N/A=not applicable JT or JW= approved				
•••	1	Complete application form. (Blue Route Sheet)				
•••	2	Complete and return submittal form.				
•••	3	Label concept plan. Plan is to contain all lots, roads improvements, notes, easements, required statements, and all other pertinent information on a sing sheet (unless a match line situation). Go through list of required data.	gle			
•••	5	Provide developer's/subdivider's name, address, e-mail and phone number. Include a contact person.				
•••	6	Provide designer's name, address, e-mail and phone number.  Include a contact person.				
•••	7. •••	Show unit/phase number.				
•••	8	Provide a complete certified closed boundary survey to scale with north arroprovide date of survey.	)W.			
•••	9	Identify disposition of all existing structures.				
•••	10	Provide location sketch.				
•••	11. <b></b>	Show District(s), Land Lot(s), Parcel(s).				
•••	12	Show scale, not to be less than 100 feet to one inch.				
•••	13	State zoning.				

•••	14. •••	Note Density. Not to exceed.
•••	15	Show adjoining property information (subdivision name, lot numbers, block letters and zoning; or adjoining property owners and zoning.)
•••	16	Boundary does not correspond with tax maps; or creates a landlocked remnant. Discuss.
•••	17	Note minimum dwelling size. To be
•••	18	Show rezoning, conditional use permit, variance, waiver, modification number(s), type(s), date(s) of approval and all conditions.
•••	19	Show acreage
•••	20	Show compliance with conditions of
•••	21	Provide stub street to See (items)
•••	22	Tie into existing stub street. See
•••	23	Eyebrow cul-de-sac (half cul-de-sacs) are prohibitedPlease revise
•••	24	Provide of subdivision as open spaceOpen space shall be contiguous with a minimum width of 40 feetRemove or modify exclusions per section 95.A of the Zoning Ordinance or5.8.1 of the Development Regulations
	25	This project appears to meet or exceed the threshold established for a Development of Regional Impact. Please refer to the attached Request for Review Form to determine the threshold established for your development type. Contact the Planning Division to submit the form for processing to the Atlanta Regional Committee.
•••	26	Provide five (3) sets of corrected/approved plans to the Planning and Development Department for issuance of a permit. (These sets are to be made after the Certificate of Development Plans has been signed on the original. One set must contain original seal and signatures (P.E., LS, LA, etc).

III. ADDITIONAL COMMENTS
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