



Date Received: _____

Final Development Plan

City of Baton Rouge / Parish of East Baton Rouge
Office of the Planning Commission, 1100 Laurel Street, Suite 104
Baton Rouge, Louisiana 70802

Staff Use Only

Fee(s): _____

Application Taken By: _____

Case Number: _____

Meeting Date: _____

MPN Project Number: _____

Please Print or Type (all entities listed below will be copied on all comments)

1. Type of application: PUD TND
2. Submittal: New Revised (PUD-__-__)
3. Type of revision: Major Site Change Minor Change
4. Applicant Name and Title: _____
 Email Address: _____ Daytime Phone Number: _____
 Business (if applicable): _____
 Address: _____ City: _____ State: _____ ZIP: _____
5. Developer (if applicable): _____
 Email Address: _____
6. Name of Property Owner: _____
 Email Address: _____ Daytime Phone Number: _____
 Address: _____ City: _____ State: _____ ZIP: _____
7. Subject Property Information:
 CPPC Lot ID#(s): _____
 Lot #(s): _____ Block/Square: _____
 Subdivision or Tract Name: _____
 (If property is not subdivided, attach a complete legal description and a survey map indicating bearings and dimensions.)
 Nearest Intersection: _____
8. Specific proposed use as described in proposed development narrative.

9. Size of the Property: _____

10. Action Requested: **Final Development Plan Approval**

____ Applicant's Initials

11. Table of Uses:

	Low Density Residential	Medium Density Residential	High Density Residential	Commercial / Office	Public and Semi-Public	Industrial	Open Space
Total # of Units				N/A	N/A	N/A	N/A
Total # of Lots							
Total Square Feet of Buildings	N/A	N/A	N/A				N/A
Total Acreage							
Percentage of Site							

12. Table of Parking Spaces:

	Number of Spaces Required	Number of Spaces Proposed	Number of Handicap Spaces Proposed	Total Number of Spaces Proposed
Section, Phase or Filing				
Section, Phase or Filing				
Section, Phase or Filing				
Section, Phase or Filing				
Total				

13. Access:

Private Street Public Street (City-Parish) Public Street (State)

14. Stormwater Management Plan (SMP):

Submitted Not Submitted If not submitted please explain:

15. Drainage Impact Study:

Submitted Not Submitted If not submitted please explain:

____ Applicant Initials

16. Water Quality Impact Study:

Submitted Not Submitted If not submitted please explain:

17. Compliance with Development Review Committee and/or Departments of Development and Transportation and Drainage comments will be required prior to approval:

Acknowledgment

18. Acknowledgement:

I acknowledge that private deed restrictions or covenants may exist on the subject property. I recognize that neither the Planning Commission nor its staff may consider such deed restrictions or covenants, if any, when determining approval or denial of an application, nor can the City or Parish enforce private deed restrictions or covenants. It is my responsibility as an Applicant to determine if any such deed restrictions and covenants exist on the subject property, and to be aware that violations of the same subject me and/or Property Owner to litigation from others.

I understand that the application fee is nonrefundable. (Applications for public hearing must be received by 10:00a.m. 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.

Signature of Applicant Type or Print Name of Applicant Date

Signature of Property Owner Type or Print Name of Property Owner Date

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. Comprehensive Plan: Consistent Not Consistent
- I. Planning District/Sub Area: _____
- J. Census Tract: _____
- K. Lot and Block: _____
- L. Council District: 1 2 3 4 5 6 7 8 9 10 11 12
- M. DRC and/or Departments of Development and Transportation and Drainage Compliance:
 No Yes If "No" explain: _____

- N. Stormwater Management Plan (SMP):
 No Yes If "No" explain: _____

- O. Drainage Impact Study (DIS):
 No Yes If "No" explain: _____

- P. Water Quality Impact Study (WQIS):
 No Yes If "No" explain: _____

- Q. Waiver(s) Requested: No Yes
- R. Complete Check List: No Yes
- S. Comments: _____

- T. Is subject property within Zone of Influence (Zachary, Central, BREC, or Health District)? If so, contact as needed.
 No Yes – date correspondence sent: _____
- U. Is subject property located on **MoveBR**? If so, contact as needed.
 No Yes – date correspondence sent: _____
- V. _____
Planning Director or Authorized Signature Date